



**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

FILED
2005 JAN 10 AM 3:48
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOCUMENT # A03000000267	
1. Entity Name CMP CHP SAN MARCOS, LTD.	

Principal Place of Business 214 PEACHTREE ST., STE. 300 ATLANTA, GA 30303	Mailing Address 214 PEACHTREE ST., STE. 300 ATLANTA, GA 30303
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2. Principal Place of Business 241 Peachtree St. Suite, Apt. #, etc. Ste. 300 City & State Atlanta, GA 30303 Zip	3. Mailing Address 241 Peachtree St. Suite, Apt. #, etc. Ste. 300 City & State Atlanta, GA 30303 Zip	Country
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01032005	Chg-LP
CR2E003 (10/03)	
4. FEI Number 26-0060086	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FL, INC 390 N. ORANGE AVE., STE. 1100 ORLANDO, FL 32801	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent
B&C Corporate Services of Central Florida, Inc.
SIGNATURE By: [Signature] Vice President DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date. \$100.00
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**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L03000006287 GP SAN MARCOS, LLC 214 PEACHTREE ST., STE. 300 ATLANTA, GA 30303	STREET ADDRESS CITY-ST-ZIP	241 Peachtree St., Ste. 300 Atlanta, GA 30303
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes
GP San Marcos LLC, General Partner, by Capitol Housing Partners, LLC, its Manager,
SIGNATURE: By: [Signature], Manager (404) 591-3587
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #