

**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007**

**FILED  
May 01, 2007 08:00 A  
Secretary of State**

**DOCUMENT # A0400000484**  
1. Entity Name  
THE VILLAGES AT HALIFAX HOUSING, LTD., LLLP



Principal Place of Business 247 NORTH WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714	Mailing Address 247 NORTH WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714
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03302007 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0917784	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

COSTOLO, W. TERRY  
301 EAST PINE STREET, SUITE 1400  
ORLANDO, FL 32801

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable.

U00000752914  
05/21/07-80038-006 500.00  
DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2007, Fee will be \$900.00**

**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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L05000109973 PICERNE HALIFAX HOUSING, LLC 247 NORTH WESTMONTE DRIVE ALTAMONTE SPRINGS, FL 32714
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P04000050409 VILLAGES AT HALIFAX PARTNERS, INC. 211 NORTH RIDGEWOOD AVENUE #200 DAYTONA BEACH, FL 32114
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**DO NOT WRITE  
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

**SIGNATURE:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/21/07

Date Daytime Phone #