

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE



1. Name of Limited Partnership	1a. DOCUMENT # A93000000867
MINTO TOWNGATE LIMITED PARTNERSHIP	

Mailing Address 4400 WEST SAMPLE ROAD, SUITE 200 COCONUT CREEK FL 33073	Principal Office Address 4400 WEST SAMPLE ROAD, SUITE 200 COCONUT CREEK FL 33073	3. Date Formed or Registered 08/24/1993	5a. Capital Contributions as Shown on record \$10,250,310.00
2. Mailing Address 4400 West Sample Road Suite, Apt. #, etc. Suite 200 City & State Coconut Creek, FL Zip Country 33073 U.S.A.	2a. Principal Office Address 4400 West Sample Road Suite, Apt. #, etc. Suite 200 City & State Coconut Creek, FL Zip Country 33073 U.S.A.	3a. Date of Last Report 06/19/1998	5b. Amount of Capital Contributions in FLORIDA to date. \$10,250,310.00
		4. State or Country of Formation FL	
		6. FEI Number 65-0426572	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent JOBLOVE, MICHAEL D 3211 WEST BROWARD BLVD. SUITE 310 FORT LAUDERDALE FL 33324	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) \_\_\_\_\_ DATE March 9, 1999

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) MINTO COMMUNITIES (PEMBROKE)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 4400 WEST SAMPLE ROAD	11b. City, State & Zip Code COCONUT CREEK FL 3307	11c. Registration/Document Number V55983
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3-23-99

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

Minto Communities (Pembroke), Inc.

SIGNATURE By: *Frank Rodgers* Vice President DATE March 9, 1999

Typed or Printed Name of General Partner Signing Form Frank Rodgers Daytime Telephone Number 954-973-4490

CR2E003 (12/98)