## 2008 LIMITED PARTNERSHIP ANNUAL REPORT FILED Due By May 1, 2008 Jan 25, 2008 08:00 Al DOCUMENT # A9400001850\*\* **Secretary of State** ATRIUM HOLLYWOOD APARTMENTS, LTD. Principal Place of Business Mailing Address 2525 HOLLYWOOD BOULEVARD 2525 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 01212008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0543038 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ATRIUM HOLLYWOOD APARTMENTS, INC. DO NOT WRITE 2525 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020 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 U00000798595 FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 01/30/08-80033-021 500.00 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. GENERAL PARTNER INFORMATION 12. P94000092871 DOCUMENT # ATRIUM HOLLYWOOD APARTMENTS, INC. NAME STREET ADDRESS 2525 HOLLYWOOD BOULEVARD CITY-ST-7IP HOLLYWOOD, FL 33020 DOCUMENT & NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT 4 NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

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

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ED OR PRINTED NAME OF BIGNING GENERAL PARTNEY

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SIGNATURE: