

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000001979

**FILED**  
**Jan 16, 2010**  
**Secretary of State**

**Entity Name:** GATE PARKWAY APARTMENTS, LTD.

**Current Principal Place of Business:**

359 CAROLINA AVENUE  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

359 CAROLINA AVENUE  
SUITE #200  
WINTER PARK, FL 32789 US

**Current Mailing Address:**

359 CAROLINA AVENUE  
WINTER PARK, FL 32789 US

**New Mailing Address:**

359 CAROLINA AVENUE  
SUITE #200  
WINTER PARK, FL 32789 US

FEI Number: 20-3711624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOWNING, GRANT T  
222 WEST COMSTOCK AVENUE  
SUITE 101  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P05000145550  
Name: EPI-GATE PARKWAY EQUITY, INC.  
Address: 359 CAROLINA AVENUE  
City-St-Zip: WINTER PARK, FL 32789 FL

**ADDRESS CHANGES ONLY:**

Address: 359 CAROLINA AVENUE, SUITE #200  
City-St-Zip: WINTER PARK, FL 32789 FL

Document #:  
Name: PRUDENTIAL INSURANCE CO  
Address: 8 CAMPUS DRIVE 4TH FL  
City-St-Zip: PARSIPPANY, NJ 07054

Address:  
City-St-Zip:

Document #:  
Name: PRUDENTIAL - THORNTON  
Address: 8 CAMPUS DRIVE, 4TH FLOOR  
City-St-Zip: PARSIPPANY, NJ 07054

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: GREG JACOBY

GP

01/16/2010

Electronic Signature of Signing General Partner

Date