

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 14, 2007**

**FILED**  
**Jun 28, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A02000000464**

1. Entity Name  
**GRANDE COURT NORTH PORT ASSOCIATES, LTD.**



Principal Place of Business  
**703 WATERFORD WAY  
STE. 800  
MIAMI, FL 33126**

Mailing Address  
**703 WATERFORD WAY  
STE. 800  
MIAMI, FL 33126**



06202007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>01-0677751</b>	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

**\$8.75 Additional Fee Required**

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

**PITTS, W. DOUGLAS  
703 WATERFORD WAY  
STE. 800  
MIAMI, FL 33126**

**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.

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$500.00  
Due by September 14, 2007**

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**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 #	<b>P02000033077</b>
NAME	<b>GRANDE COURT NORTH PORT, INC.</b>
STREET ADDRESS	<b>703 WATERFORD WAY, STE. 800</b>
CITY-ST-ZIP	<b>MIAMI, FL 33126</b>

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U00000766736  
06/28/07-80002-020 500.00

**DO NOT WRITE  
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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

**6/20/07 305-261-4330**  
Date Daytime Phone

STAPLE CHECK HERE