

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

FILED

2007 APR 30 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A02000001327

1. Entity Name  
BILTMORE GROVE ESTATES, LTD.



Principal Place of Business  
BRICKELL BAYVIEW CENTER  
80 SW 8TH STREET, STE. 1870  
MIAMI, FL 33130

Mailing Address  
BRICKELL BAYVIEW CENTER  
80 SW 8TH STREET, STE. 1870  
MIAMI, FL 33130



04162007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

56-2311174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KAHN, S. LAWRENCE III  
BRICKELL BAYVIEW CENTER  
80 SW 8TH STREET, STE. 1870  
MIAMI, FL 33130

**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**  
**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 # P02000096678  
NAME LOWELL AT BILTMORE GROVE, INC.  
STREET ADDRESS 80 SW 8TH STREET, STE. 1870  
CITY-ST-ZIP MIAMI, FL 33130

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05/15/07--01048--020 \*\*500.00

**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

4/24/07

Date

305-577-8550

Daytime Phone #

STAPLE CHECK HERE