

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001359

Entity Name: TSC GOLFVIEW, LTD

**FILED**  
**Jan 17, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

333 W CAMINO GARDENS BOULEVARD STE. 200  
BOCA RATON, FL 33432

**New Principal Place of Business:**

333 W CAMINO GARDENS BOULEVARD  
SUITE 200  
BOCA RATON, FL 33432 US

**Current Mailing Address:**

333 W CAMINO GARDENS BOULEVARD STE. 200  
BOCA RATON, FL 33432

**New Mailing Address:**

333 W CAMINO GARDENS BOULEVARD  
SUITE 200  
BOCA RATON, FL 33432 US

FEI Number: 51-0433311

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLEMAN, T. SCOTT  
333 W CAMINO GARDENS BOULEVARD STE. 200  
BOCA RATON, FL 33432 US

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

COLEMAN, T. SCOTT  
333 W CAMINO GARDENS BOULEVARD  
SUITE 200  
BOCA RATON, FL 33432 US

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:

01/17/2006

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P02000109557  
Name: TSC GOLFVIEW, INC.  
Address: 333 W CAMINO GARDENS BOULEVARD STE. 200  
City-St-Zip: BOCA RATON, FL 33432

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip: BOCA RATON, FL 33432 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: T. SCOTT COLEMAN

D

01/17/2006

Electronic Signature of Signing General Partner

Date