

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUN -6 AM 10:56

DOCUMENT # A03000000943

1. Entity Name
GRANDEVILLE ON SAXON LTD.



Principal Place of Business
2221 LEE ROAD, SUITE 28
WINTER PARK, FL 32789

Mailing Address
2221 LEE ROAD, SUITE 28
WINTER PARK, FL 32789

2. Principal Place of Business
650 S. Northlake Blvd
Suite, Apt. #, etc.
Suite 450

3. Mailing Address
650 S. Northlake Blvd
Suite, Apt. #, etc.
Suite 450

City & State
Altamonte Springs FL
Zip
32701

City & State
Altamonte Springs FL
Zip
32701

03312005 Chg-LP CR2E003 (10/03)

4. FEI Number
20-0063466

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LECCESI, SALVADOR F
2221 LEE ROAD, SUITE 28
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

650 S. Northlake Blvd, Suite 450
City Altamonte Springs FL Zip Code 32701

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

9. Capital Contributions
as Shown on record. \$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # A03000000941
NAME GV ON SAXON, LTD
STREET ADDRESS 2221 LEE ROAD, SUITE 28
CITY-ST-ZIP WINTER PARK, FL 32789

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 650 S. Northlake Blvd, Suite 450
CITY-ST-ZIP Altamonte Springs, FL 32701

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 600056385766
CITY-ST-ZIP 06/21/05--01013--015 **458.75

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

#150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

4-6-05

Date

407-645-5575

Daytime Phone #

STAPLE CHECK HERE