

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

**FILED**  
**Mar 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A04000000067**

**1. Entity Name**  
**COURTNEY MANOR APARTMENTS LIMITED PARTNERSHIP**



**Principal Place of Business**  
100 COLONIAL CENTER PARKWAY, SUITE 470  
LAKE MARY, FL 32746

**Mailing Address**  
100 COLONIAL CENTER PARKWAY, SUITE 470  
LAKE MARY, FL 32746



01262007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
33-1080805

**Applied For**  
Not Applicable

**5. Certificate of Status Desired**



**\$8.75 Additional Fee Required**

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

SCHAFFER, JOHN A  
100 COLONIAL CENTER PARKWAY, SUITE 470  
LAKE MARY, FL 32746

**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 #** P03000130111  
**NAME** COURTNEY MANOR DEVELOPMENT, INC.  
**STREET ADDRESS** 100 COLONIAL CENTER PARKWAY, SUITE 470  
**CITY-ST-ZIP** LAKE MARY, FL 32746

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04/04/07-80003-004 508.75

**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:**

*John A. Schaffer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/7/07

Date

(407) 333-0066

Daytime Phone #

STAPLE CHECK HERE