

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

**FILED**  
**Mar 27, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A04000001807**

1. Entity Name  
**LENOX PLACE REALTY APARTMENTS, LTD**



Principal Place of Business  
**21301 POWERLINE ROAD, SUITE 312**  
**BOCA RATON, FL 33433**

Mailing Address  
**PO BOX 11229**  
**KNOXVILLE, TN 37939**



03202007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**20-2066102**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

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

**BLALOCK, WALTERS, HELD & JOHNSON, P.A.**  
**802 - 11TH STREET WEST**  
**BRADENTON, FL 34205-7734**

**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 # **P04000157021**  
NAME **LENOX PLACE REALTY, INC.**  
STREET ADDRESS **21301 POWERLINE ROAD, SUITE 312**  
CITY-ST-ZIP **BOCA RATON, FL 33433**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:** Bernard H. Kayden **Bernard H. Kayden, President** 3/21/07 (914) 381-1010

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

**DO NOT WRITE**  
**IN THIS SPACE**

U00000680744  
04/04/07-80014-009 500.00