

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED

08 FEB 19 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A05000000260

1. Entity Name
DIXIE COURT ASSOCIATES, LTD.



Principal Place of Business
2950 SW 27TH AVE. SUITE 200
MIAMI, FL 33133

Mailing Address
2950 SW 27TH AVE. SUITE 200
MIAMI, FL 33133

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102008 Chg-LP CR2E003 (12/06)

4. FEI Number
20-2287795

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MCDONOUGH, BRIAN J
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI, FL 33130

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 date if applicable.

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P05000018065**
NAME **DIXIE COURT GP, INC.**
STREET ADDRESS **901 NW 10TH AVE**
CITY-ST-ZIP **FT LAUDERDALE, FL 33311**

STREET ADDRESS **6001 17965576**
CITY-ST-ZIP **02/13/08--01029--014 **500.00**

DOCUMENT # **L06000029464**
NAME **TCG DIXIE COURT, LLC**
STREET ADDRESS **2950 S.W. 27TH AVENUE SUITE 200**
CITY-ST-ZIP **MIAMI, FL 33133**

STREET ADDRESS
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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:

[Signature]

2/1/08

305-476-8118

STAPLE CHECK HERE