

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

DOCUMENT # A05000000783

1. Entity Name
SOUTHEASTERN RIVERCREST PARTNERS, LTD.



Principal Place of Business
5900 N. ANDREWS AVE
SUITE 500
FT. LAUDERDALE, FL 33324

Mailing Address
ATTN: KATHRYN MANSFIELD
3100 MONTICELLO AVE., SUITE 200
DALLAS, TX 75205

FILED
07 JUN -1 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05102007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2709350

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PLANTATION ROAD
PLANTATION, FL 33324

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$900.00
On or after September 14, 2007, Fee will be \$1000.00

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 # F99000000851
NAME TARRAGON CORPORATION
STREET ADDRESS 3100 MONTICELLO AVE., SUITE 200
CITY-ST-ZIP DALLAS, TX 75205

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900104238889
06/12/07--01005--026 **3500.00

**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:

Kathryn Mansfield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Kathryn Mansfield
Exp of General Partner

5/15/2007

Date

214-549-2200

Daytime Phone #

STAPLE CHECK HERE