

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A07000000623

1. Entity Name
GEM LAKE APARTMENTS, LTD.



FILED

08 FEB -8 PM 2:33

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business
**533 W. NEW ENGLAND AVENUE
SUITE C
WINTER PARK, FL 32789 US**

Mailing Address
**P.O. BOX 350
WINTER PARK, FL 32790 US**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



01032008 Chg-LP CR2E003 (12/06)

4. FEI Number ☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**WELBOURNE AVE. CORP.
222 S. PENNSYLVANIA AVENUE
SUITE 200
WINTER PARK, FL 32789**

7. Name and Address of New Registered Agent
Name **LAURA MOA**
Street Address (P.O. Box Number is Not Acceptable)
533 W. NEW ENGLAND AVE Suite C
City **Winter park** FL **32789**

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]* DATE **2/4/08**

**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 #	P07000057159	STREET ADDRESS	
NAME	MONROE AVENUE CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	PO BOX 350		
CITY-ST-ZIP	WINTER PARK, FL 327900350		
DOCUMENT #		STREET ADDRESS	
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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: *[Signature]* **Daniel B. Bellows LP of GP 1-4-08 407-644-3151**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE