

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Jun 10, 2005 08:00 AM
Secretary of State

DOCUMENT # A15701 1. Entity Name FOUNTAINGATE ASSOCIATES "LIMITED PARTNERSHIP"					
Principal Place of Business 1000 S. OLD WOODWARD AVE. SUITE 201 BIRMINGHAM, MI 48009			Mailing Address 1000 S. OLD WOODWARD AVE. SUITE 201 BIRMINGHAM, MI 48009		
2. Principal Place of Business Suite, Apt #, etc.			3. Mailing Address Suite, Apt #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 38-2512428	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RIVKIN, BERNARD 5940 SW 19TH STREET PLANTATION, FL 33317				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ <small>Signature, typed or printed name of registered agent and the if applicable</small>					
9. Capital Contributions as Shown on record. \$6,975.00			10. Amount of Capital Contributions in FLORIDA to date. \$6,975.00		
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 #	NAME		STREET ADDRESS		
	BROWN, EMERY				
STREET ADDRESS	1000 S. OLD WOODWARD AVE.		CITY - ST - ZIP		
CITY - ST - ZIP	BIRMINGHAM, MI 48009				
DOCUMENT #	NAME		STREET ADDRESS		
	RIVKIN, BERNARD				
STREET ADDRESS	1000 S. OLD WOODWARD AVE.		CITY - ST - ZIP		
CITY - ST - ZIP	BIRMINGHAM, MI 48009				
DOCUMENT #	NAME		STREET ADDRESS		
	SAVIN, JOSEPH				
STREET ADDRESS	1000 S. OLD WOODWARD AVE.		CITY - ST - ZIP		
CITY - ST - ZIP	BIRMINGHAM, MI 48009				
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CITY - ST - ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Bernard Rivkin</i>			Signature and Typed or Printed Name of Signing General Partner		
<i>5/23/05</i>			Date		
<i>248-647-3250</i>			Daytime Phone #		

STAPLE CHECK HERE