

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A15924

SAN SOUCI LAKES, LTD.



Mailing Address
3000 N. TAMiami TRAIL
NORTH FORT MYERS FL 33903

Principal Office Address
3000 N. TAMiami TRAIL
NORTH FORT MYERS FL 33903

3. Date Formed or Registered
01/12/1984

5a. Capital Contributions as
Shown on record
\$275,000.00

3a. Date of Last Report
10/23/1995

4. State or Country of Formation
FL

5b. Amount of Capital
Contributions in FLORIDA
to date:
275,000.00

2. Mailing Address

2a. Principal Office Address

31550 NORTHWESTERN HWY
Suite, Apt. #, etc.

31550 NORTHWESTERN HWY.
Suite, Apt. #, etc.

SUITE 200

SUITE 200

City & State
FARMINGTON HILLS, MI

City & State
FARMINGTON HILLS, MI

Zip Country
48334 USA

Zip Country
48334 USA

6. FEI Number
59-2363750

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

ROSEN, MARVIN
222 LAKEVIEW AVENUE
SUITE 800
WEST PALM BEACH FL 33401-6112

10. If changed, new Registered Agent/Office

Name
HOMISCO INCORPORATION, INC.
Street Address (P.O. Box Number Is Not Acceptable)
222 LAKEVIEW AVE.
Suite, Apt. #, etc.
SUITE 800
City
W. PALM BEACH FL Zip Code
33411

10a Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) X By: Marvin S. Rosen, President DATE 12-13-96

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

PARTRICH, SPENCER M.

31550 NORTHWESTERN HW

FARMINGTON HILLS MI

SHAPIRO, MICKEY

31550 NORTHWESTERN HW

FARMINGTON HILLS MI

100002035541--7
-12/20/96--01106--005
****576.25 ****576.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 11/6/96

Typed or Printed Name of General Partner Signing Form

SPENCER M. PARTRICH

Daytime Telephone Number

910-951-2700

CR2E003 (6/96)

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