

# 2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A16686

FILED  
Jul 06, 2006  
Secretary of State

**Entity Name:** UNIVERSITY GARDENS APARTMENTS PARTNERSHIP, LTD.

**Current Principal Place of Business:**

708 SW 16TH AVENUE  
MANAGEMENT OFFICE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

708 SW 16TH AVENUE  
MANAGEMENT OFFICE  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 59-2067802      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

STEWART, SUSAN  
708 S.W. 16TH AVE.  
MANAGEMENT OFFICE  
GAINESVILLE, FL 32601 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: COLLER, DONALD M.  
Address: 708 S.W. 16TH AVE.  
City-St-Zip: GAINESVILLE, FL

Address:  
City-St-Zip:

Document #:

Name: HARMS, FRED A.  
Address: 708 SW 16TH AVE.  
City-St-Zip: GAINESVILLE, FL

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DONALD M. COLLER

MGR

07/06/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date