FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED 98 OCT -7 PM 4: 30

DOCUMENT# 1. Name of Limited Partnership SECRETARY OF STATE A23186 TALLAHASSEE, FLORIDA COLONIAL VILLAGE LIMITED PARTNERSHIP 5a. Capital Contributions as Shown on record 3. Date Formed or Registered Malling Address Principal Office Address 09/09/1986 280 DAINES STREET 280 DAINES STREET \$4,150,520.00 SUITE 300 SUITE 300 3a. Date of Last Report BIRMINGHAM MI 48009 **BIRMINGHAM MI 48009** 10/14/1997 Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address \$1,200,000.00 Suite, Apl. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For 38-2689854 Not Applicable City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Zip Country 8. Make check payable to: Dept. of State (See reverse side for fee Information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name RINES, MILTON T Street Address (P.O. Box Number Is Not Acceptable) 15235 SOUTH TAMIAMI TRAIL FT. MYERS FL 33908 Sulte, Apt. #, etc. Zip Code City 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)_ A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. 11c. Name(s) of General Partner(s) 11b. City, State & Zip Code Document Number UNIPROP, INC. 280 DAINES ST., SUITE BIRMINGHAM MI P05889 GP COLONIAL VILLAGE CORP. 280 DAINES ST., SUITE **BIRMINGHAM MI 48009** F93000005761 10/13/98-7 ****526 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). Floride 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 accutate and accutate and accutate and accutate the section of the limited pertnership, receiver or trustee empowered to execute this cooper astroguised by chapter 620, Florida Statutes.

SIGNATURE

UNIPROP, INC., Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number 248-645-9220

9/20/98