

FILE ON OR BEFORE APRIL 5, 1996 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



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

FILED

96 NOV -8 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A26898

VILLAGES OF ASCOT, LTD.

Mailing Address

9700 GLADIOLUS DRIVE
FT. MYERS FL 33908

Principal Office Address

9700 GLADIOLUS DRIVE
FT. MYERS FL 33908

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA 08/16/1988

3a. Date of Last Report
05/01/1995

4. State or Country of Formation
FL

City, State & Zip

5a. Capital Contributions as Shown
on Record
\$2,250,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number
59-2386098

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED
\$8.75 Additional Fee required
for a Certificate of Status ☐

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

DARSANI, MOHAMED A
9700 GLADIOLUS DR.
FT. MYERS FL 33908

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc

City

400002010034--9
-11/20/96--01090--004
****138.75 ****138.75
FL

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)

DATE

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

GLADIOLUS HOLDINGS, INC.

9700 GLADIOLUS DRIVE

FT. MYERS FL

K14118

400002010034--9
-11/20/96--01090--005
****500.00 ****500.00

DECLARATION

96
Dec

Sent 97 annual report

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

4/24/96

Typed or Printed Name of General Partner Signing Form

SAMIR FANSA

Telephone Number

941-489-4455

CR2E003 (11/95)

VILLAGES OF
ASCOT

A26898

November 1, 1996

Florida Department Of State
Division Of Corporations.
P. O. Box 6327
Tallahassee, FL 32314

Subject: Villages Of Ascot, Ltd.
Ref Number: A26898

Dear Sir/Madam:

Please accept the enclosed application for reinstatement for Partnership and a limited partnership annual report. Also enclosed is the amount of \$1076.25 divided into 3 checks for fees and penalty.

It was unfortunate that the annual report was not mailed on time. It was mailed on the 24th of April and returned to us. We sincerely apologize for the delay in sending it again. We do wish to ask for a waiver of the total penalty or part of it if possible.

The fee for filling the annual report for 1997 will be mailed in timely manner along with the proper form which we did not receive yet.

If you have any questions or need any more information please feel free to contact our office at the provided Mailing address or phone numbers.

Thank you,

Mohamed Al-Darsani