

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

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 FEB -6 PM 4:17

1. Name of Limited Partnership

**1a. DOCUMENT #
A 26983**

Garden South 535, Ltd.

Mailing Address 3330 Glencairn Court Suite 201 Bonita Springs, FL 34134		Principal Office Address (same)		3. Date Formed or Registered 08/31/1988	5a. Capital Contributions on Shown on Account \$1,000,000
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 11/07/95	5b. Amount of Capital Contributions in FL (MICA to date) \$920,239
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		6. FEI Number 59-2910730	☐ Applied For ☒ Not Applicable
Zip Country		Zip Country		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

Rihs, Dominique C.
5131 Sunbury Court
Naples, FL 34104

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number is Not Acceptable)
300002085343--5
Suite, Apt. #, etc.
-02/12/97--01080--014
City
*****576.25 *****576.25
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 responsibility 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 Exemption Number
Hofmann, Volker	Königinstr. 25	80539 München, Germany	
Rimbach, Thomas	Hermann-Gmeiner- Weg 16	81929 München, Germany	

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 submitted 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, partners or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Thomas Rimbach

DATE 02/03/1997

Thomas Rimbach

Daytime Telephone Number (941) 947 3217

Typed or Printed Name of General Partner Signing Form

CR2003 (6/96)