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SECRETARY OF STATE OF



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 11, 2004

PATRICIA M. GREEN 818 WEST BROOKS AVENUE NORTH LAS VEGAS, NV 89030

SUBJECT: BROWARD GARDENS ASSOCIATES, LTD.

Ref. Number: A28016

We have received your document for BROWARD GARDENS ASSOCIATES, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 104A00032870

SECRETARY OF STATE OHS DIVISION OF CORPORATIONS

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited

partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida. 1. Broward Gardens Associates Name of the limited partnership 1989 <u> A28016</u> Date of filing/registration in Florida Document number assigned 4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Green Dotson 3700 Lowry Court Address Tampa , Florida 33610 City, State and Zip 5. The name and address of the new registered agent and/or office: Paula Putnam Name 621 NW 2nd Street Florida street address (P.O. Box not acceptable) Ocala, 34475 City, State and Zip 6. Such change(s) was/were authorized by the general partners. Green, Vice President of Signature of General Partner Patricia Real Property Services Corp., general partner I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partners been notified in writing of this change.

> Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00

Signature of Registered Agent Paula Putnam