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

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** A30913

## KENSINGTON PLACE TOWNHOMES, A LIMITED PARTNERSHIP

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

96 00T 28 PH 3: 40



			]				
Mailing Address 900 BROOKSTONE CENTRE PARKWAY		Principal Office Address 900 BROOKSTONE CENTRE PARKWAY		3. Date Formed or Registered 12/13/1990	5a. Capital Contributions as Shown on record \$98.00  5b. Amount of Capital Contributions in FLORIDA to date		
COLUMBUS GA 31904	COLUMBUS GA 31904			3a. Date of Last Report 10/23/1995			
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation			
Suite, Apt. #, etc.	Suite, Apt #, etc.	Suite, Apt #, etc.		6. FET Number 58-1922871			
City & State	City & State	City & State		7. Certificate of Status Desired	Not Applicable  \$8.75 Additional fee Required		
Zip Country	Zip	Country  Fee Required  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			
CORPORATION INFORMATION SERVICES, INC. 502 EAST PARK AVENUE TALLAHASSEE FL 32301		Name Street Address (P.O. Box Number Is Not Acceptable)					
		Suite Apt #, etc					
		Suite Apt #, etc					
10a. Pursuant to the provisions of sections 620.1 for the purpose of changing its registered of agent. Lam familiar with, and accept the ob-	ffice or registered agent, or both, in the Sta	ete of Florida. Such char		nized or registered under the laws of	the State of Flor	ida, submits this statement	
SIGNATURE (Registered Agent Accepting Appointm	<del> </del>	<del></del>		DATE	-		
A GENERAL PARTNER TH	HAT IS A CORPORATION	ON, LIMITED D AND ACTIV	PART E WIT	NERSHIP OR OTHE TH THIS OFFICE.	ER BUS	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post	Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State & Zip Code	11c.	Registration/ Document Number	
FLOURNOY, JOHN F.	900 BROOKSTON	900 BROOKSTONE PARKWA		COLUMBUS GA			
FLOURNOY DEV. COMPANY	900 BROOKSTON	900 BROOKSTONE PARKWA		COLUMBUS GA		P04689	
					al	b-30	
Note: General partners MAY	NOT be changed on this	s form; an am	endme	nt must be filed to ch	ange a g	eneral 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 Trelease 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 October 18, 1996

George S. Moore, Senior V.P./Treasurerelephone Number (706) 324-4000