

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A32219

**FILED**  
**Jul 29, 2009**  
**Secretary of State**

**Entity Name:** OAK POINTE APARTMENTS, A LIMITED PARTNERSHIP

**Current Principal Place of Business:**

P.O. BOX 6566  
COLUMBUS, GA 31995

**New Principal Place of Business:**

900 BROOKSTONE CENTRE PARKWAY  
COLUMBUS, GA 31904

**Current Mailing Address:**

P.O. BOX 6566  
COLUMBUS, GA 31995

**New Mailing Address:**

**FEI Number:** 58-1953560      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: FLOURNOY, JOHN F.  
Address: 900 BROOKSTONE CENTRE  
City-St-Zip: COLUMBUS, GA  
Document #: M97000000043

Name: FLOURNOY TAX CREDIT INVESTMENT COMPANY LLC  
Address: 900 BROOKSTONE CENTRE  
City-St-Zip: COLUMBUS, GA

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JOHN F. FLOURNOY

GP

07/29/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date