

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

LIMITED PARTNERSHIP ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 SEP 23 AM 10:46

1. Name of Limited Partnership	1a. DOCUMENT # <b>A33535</b>
<b>UNIVERSITY COMMONS-GAINESVILLE, LTD.</b>	



Mailing Address	Principal Office Address
600 LUCKIE DR., #424 BIRMINGHAM AL 35223	600 LUCKIE DR., #424 BIRMINGHAM AL 35223
2. Mailing Address	2a. Principal Office Address
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State	City & State
Zip	Zip
Country	Country

3. Date Formed or Registered	5a. Capital Contributions as Shown on record
10/12/1992	\$3,223,000.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
09/27/1995	\$ 3,123,000.00
4. State or Country of Formation	6. FEI Number
AL	63-1076290
7. Certificate of Status Desired	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
8. Make check payable to: Dept. of State (See reverse side for fee information)	<input type="checkbox"/> \$8.75 Additional Fee Required

9. Name and Address of Current Registered Agent
<b>CORPORATION INFORMATION SERVICES, INC.</b> 1201 HAYS STREET TALLAHASSEE FL 32301

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt #, etc.
City
FL
Zip Code

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
CAPSTONE DEVELOPMENT CORP.	600 LUCKIE DRIVE, SUI	BIRMINGHAM AL 35223	L04608
8000019622491 -10/02/95 - -01009--020 ***576.25 ***576.25			

**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.

CAPSTONE DEVELOPMENT CORP  
SIGNATURE by: *Joan C. Rasherru*  
Vice-President, Joan C. Rasherru

DATE 9-18-96  
(205) 871-0020

CRPE003 (6/96)