

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 17 AM 10:47

DOCUMENT # A93000000008

1. Entity Name
HOMESTEAD APARTMENTS LIMITED



Principal Place of Business
%GAINESVILLE REAL ESTATE MNGT. CO., INC.
2040 N.W. 67TH PLACE
GAINESVILLE, FL 32653

Mailing Address
%GAINESVILLE REAL ESTATE MNGT. CO., INC.
2040 N.W. 67TH PLACE
GAINESVILLE, FL 32653

DO NOT WRITE IN THIS SPACE

01112006 No Chg-LP CR2E003 (11/05)

4. FEI Number
59-3161286

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CRUTCHER, KEITH A
2040 N.W. 67TH PLACE
GAINESVILLE, FL 32653

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P98000065588
NAME HOMESTEAD APARTMENTS MANAGEMENT, INC.
STREET ADDRESS 2040 N.W. 67TH PLACE
CITY-ST-ZIP GAINESVILLE, FL 32653

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600069159816
03/31/06--01027--005 **500.00

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Keith Crutcher President Keith Crutcher

3/8/06

(352) 316-4937

STAPLE CHECK HERE