

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Mar 07, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # A93000000009**

1. Entity Name  
**GATOR VILLAGE 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**



01092008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-3161283**

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 32606-3265**

**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, 2008, 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 # **P92000006734**  
NAME **GAINESVILLE REAL ESTATE MANAGEMENT CO., INC**  
STREET ADDRESS **2040 N.W. 67TH PLACE**  
CITY-ST-ZIP **GAINESVILLE, FL 32653**

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U000000850683  
03/25/08-80007-018 500.00

**DO NOT WRITE  
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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* 2/11/08 352-376-4939

STAPLE CHECK HERE