2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9300000867

1. Entity Name
MINTO TOWNGATE LIMITED PARTNERSHIP



Principal Place of Business 4400 WEST SAMPLE ROAD. SUITE 200 COCONUT CREEK FL 33073

SIGNATURE:

Mailing Address 4400 WEST SAMPLE ROAD. SUITE 200 COCONUT CREEK FL 33073 FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

MJH

2. Principal Place of Business		3. Mailing Address		A^{∞} , torsall large ration shift from some soull point outly obtain order ratios of the soull sou	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUI BY MAY 1, 2003	
City & State		City & State		4. FEI Number 65-0426572 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JOBLOVE, MICHAEL D 8211 WEST BROWARD BLVD. SUITE 310 FORT LAUDERDALE FL 33324			Name Street Add	ress (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
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 9. Capital Contributions 410.350.310.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE					
as Shown		in FLORIDA to da		SEE REVERSE SIDE FOR FEE INFORMATION	
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	13.	ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	V55983 MINTO COMMUNITIES (PEMBROKE), INC. 4400 WEST SAMPLE ROAD, SUITE 200 COCONUT CREEK FL 33073-3450		STREET ADDRESS CITY-SI-ZIP		
DOCUMENT #			STREET ADDRESS		
STREET ADDRESS			CITY-ST-ZIP	700017331567 04/29/0301094006 **526.25	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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					