

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000001323

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** MARINER'S COVE APARTMENTS ASSOCIATES, LTD.

**Current Principal Place of Business:**

501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 65-0484234

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VOGT, LOUIS E  
501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801 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 #: P94000070005  
Name: SOLUTIONS MARINER, INC.  
Address: 1840 CORAL WAY, SUITE 200  
City-St-Zip: MIAMI, FL 33145

Document #: P94000044490  
Name: ADVANCED HOUSING CORPORATION - MARINER, INC  
Address: 1840 CORAL WAY, SUITE 200  
City-St-Zip: MIAMI, FL 33145

Document #: L08000058425  
Name: BRM SOUTHEAST MARINER'S COVE GP, LLC  
Address: 501 NORTH MAGNOLIA AVENUE  
City-St-Zip: ORLANDO, FL 32801

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby 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: LOUIS E VOGT

MGR

03/18/2010

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

\_\_\_\_\_  
Date