2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

FILED **DOCUMENT # A93000001375** 07 APR 20 AM 9: 30 1. Entity Name STEEPLECHASE APARTMENTS, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 11635 N.W. 1ST AVENUE 11635 N.W. 1ST AVENUE BK GAINESVILLE, FL 32607 GAINESVILLE, FL 32607 03272007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3216543 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CURTIS, JOHN M DO NOT WRITE 11635 N.W. 1ST AVENUE GAINESVILLE, FL 32607 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 FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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 # NAME CURTIS, JOHN M STREET ADDRESS 11635 N.W. 1ST AVENUE 800101850808 CITY-ST-ZIP GAINESVILLE, FL 32607 DOCHMENT A NAME CURTIS, GAIL W STREET ADDRESS 11635 N.W. 1ST AVENUE CITY-ST-7IP GAINESVILLE, FL 32607 DOCUMENT A NAME SCOTT, STEVE W DO NOT WRITE STREET ADDRESS 5700 S.W. 34TH STREET, #1112 CITY-ST-ZIP GAINESVILLE, FL 32608 IN THIS SPACE DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

> John M. Curtis General Partner

3/30/2007

352-332-0838