

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A94000001548**

1. Entity Name  
**MAITLAND SUMMIT, LTD.**



Principal Place of Business  
**300 NORTH LAKE AVENUE, SUITE 620  
PASADENA, CA 91101**

Mailing Address  
**300 NORTH LAKE AVENUE, SUITE 620  
PASADENA, CA 91101**

**DO NOT WRITE IN THIS SPACE**



01092006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
**59-3265662**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

**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 # **F99000004073**  
NAME **GATEWAY GP MAITLAND, INC.**  
STREET ADDRESS **300 NORTH LAKE AVENUE, SUITE 620**  
CITY-ST-ZIP **PASADENA, CA 91101**

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1100000440212  
03/02/06-80033-002 500.00

**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: *Margaret O Shuler*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**MARGARET O SHULER**  
VICE PRESIDENT & SECRETARY

*6/23/06 GP*  
**MAITLAND, NC**

Date

Daytime Phone #

*1/9-06*

*826*  
*504-2343*

STAPLE CHECK HERE