FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 13 AM 7:47

1. Name of Limited Partnership

1a. DOCUMENT # A94000001588

SHELBY HOMES AT THE COURTYARDS, LTD. 99 Apr/Cus CM

Mailing Address	Principal Office Address
9050 PINES BLVD., SUITE 250 PEMBROKE PINES FL 33024	9050 PINES BLVD., SUITE 250 PEMBROKE PINES FL 33024

3. Date Formed or Registered: 11/28/1994

3a. Date of Last Report: 09/11/1997

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: $300,000.00

5b. Amount of Capital Contributions in FL OR DA to date:

6. FEI Number: 65-0537150 ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☒ $8.75 Additional Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)

2. Mailing Address: 2825 University Dr
Suite, Apt. #, etc.: Suite 300
City & State: Coral Springs, FL
Zip: 33065 Country: USA

2a. Principal Office Address: 2825 University Dr
Suite, Apt. #, etc.: Suite 300
City & State: Coral Springs, FL
Zip: 33065 Country: USA

9. Name and Address of Current Registered Agent

SIMON, ERIC A ESQ.
~~9050 PINE BLVD., SUITE 250~~
~~PEMBROKE PINES FL 33024~~

10. If changed, new Registered Agent/Office

Name:
Street Address (P.O. Box Number Is Not Acceptable): 2825 University Dr
Suite, Apt. #, etc.: Suite 300
City: Coral Springs FL Zip Code: 33065

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment): E. Simon DATE: 12/17/98

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
SHELBY HOMES AT THE COURTYAR	9050 PINES BLVD., SUI	PEMBROKE PINES FL 330	P94000013866

100002762191--01
-02/02/99--01073--009
****535.00 ****535.00

CR2E003 (9/98)

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE: E. Simon DATE: 12/17/98

Typed or Printed Name of General Partner Signing Form: Eric A Simon Day Time Telephone Number: 954 257-9300