
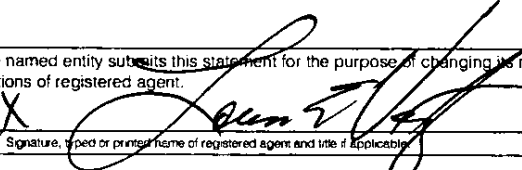
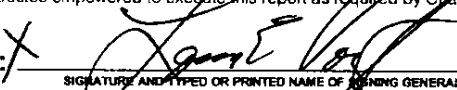


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

03 MAR 28 AM 8:38

DOCUMENT # A95000000574 1. Entity Name POINTE VISTA, LTD.					
Principal Place of Business 707 MENDHAM BLVD, SUITE 201 ORLANDO, FL 32825			Mailing Address 707 MENDHAM BLVD., STE. 201 ORLANDO, FL 32825		
2. Principal Place of Business - No P.O. Box # 495 N. Keller Rd.		3. Mailing Address 495 N. Keller Rd.			
Suite, Apt. #, etc. Ste. 301		Suite, Apt. #, etc. Ste. 301			
City & State Maitland, FL		City & State Maitland, FL			
Zip 32751	Country USA	Zip 32751	Country USA	4. FEI Number 59-3307552	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Louis E. Vogt Street Address (P.O. Box Number is Not Acceptable) 495 N. Keller Rd., Ste. 301 City Maitland FL Zip Code 32751		
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  Louis E. Vogt DATE 3/14/08					
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	L06000069617		STREET ADDRESS	495 N. Keller Rd., Ste. 301	
NAME	BRM POINTE VISTA, LLC		CITY-ST-ZIP	Maitland, FL 32751	
STREET ADDRESS	707 MENDHAM BLVD., STE. 201				
CITY-ST-ZIP	ORLANDO, FL 32825				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
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NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
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:  Louis E. Vogt			DATE: 3/14/08		DAYTIME PHONE: 407-478-1290

STAPLE CHECK HERE