

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

12 OCT 22 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # A9600000600

1. Name of Limited Partnership
THE OAKS AT POMPANO, LTD.

REINSTATEMENT 2012 JSM

100241074421
10/22/12--01052--011 **2052.50

2. Principal Office Address - No P.O. Box # 2100 HOLLYWOOD BOULEVARD		3. Mailing Office Address SAME	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State HOLLYWOOD FL		City & State	
Zip 33020	Country US	Zip	Country

4. Date Formed or Registered To Do Business in Florida	03/28/1996
5. FEI Number	65-0702328
Applied For	Not Applicable
6. CERTIFICATE OF STATUS DESIRED	<input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: **REGISTERED AGENTS OF FLORIDA, LLC**

Street Address (P.O. Box Number is Not Acceptable):
100 SOUTHEAST SECOND STREET

Suite, Apt. #, Etc.: **SUITE 2900**

City: **MIAMI** FL Zip Code: **33131-2130**

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.
Supplemental Fee(s): \$88.75 for each year due this office.
Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.

E-mail Address:
leyani.roman@cornerstonegrp.com

E-Mail address to be used for future annual report notices

9. Pursuant to the provisions of section 620 1810 or 620 1908, Florida Statutes, I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____
(REGISTERED AGENT MUST SIGN)

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

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10B. Registration Document Number
POMPANO OAKS ASSOCIATES, LTD.	2100 HOLLYWOOD BOULEVARD	HOLLYWOOD FL 33020	A9600000599
URBAN POMPANO, INC.	560 N.W. 27 AVENUE	FT. LAUDERDALE FL 33311	P96000066050

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

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

SIGNATURE _____ DATE _____

Typed or Printed Name of General Partner Signing Form _____ Telephone Number _____