

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A97000000148

1. Entity Name
GREEN GABLES APARTMENTS, LTD.



Principal Place of Business
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

Mailing Address
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

BSK

FILED

2006 APR 19 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03012006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3428714

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CURTIS, JOHN M
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

**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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
CURTIS, JOHN M
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
CURTIS, GAIL W
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SCOTT, STEVE W
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

800072416178
04/27/06--01041--021 **508.75

**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:

John M. Curtis
General Partner

04/17/06 352-332-0838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE