

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000000148

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** GREEN GABLES APARTMENTS, LTD.

**Current Principal Place of Business:**

11635 N.W. 1ST AVENUE  
GAINESVILLE, FL 32607 US

**New Principal Place of Business:**

**Current Mailing Address:**

11635 N.W. 1ST AVENUE  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

**FEI Number:** 59-3428714      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: CURTIS, JOHN M  
Address: 11635 N.W. 1ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32607 US

Document #:  
Name: CURTIS, GAIL W  
Address: 11635 N.W. 1ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32607 US

Document #:  
Name: SCOTT, STEVE W  
Address: 11635 N.W. 1ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32607 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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:** GAIL W CURTIS

GP

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date