

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 AUG 19 AM 9:00

DOCUMENT # A97000000297

1. Entity Name  
ESKO-PELICAN POINTE AFFORDABLE HOUSING, LTD.



Principal Place of Business  
340 ROYAL POINCIANA WAY, SUITE 305  
PALM BEACH, FL 33480

Mailing Address  
1544 SAWDUST ROAD, SUITE 210  
THE WOODLANDS, TX 77380

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08042005

Chg-LP

CR2E003 (10/03)

4. FEI Number

65-0730295

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

-Fee Required-

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JENKINS, JAMES  
340 ROYAL POINCIANA WAY, SUITE 305  
PALM BEACH, FL 33480

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

9. Capital Contributions  
as Shown on record.

\$1,994,545.00

10. Amount of Capital Contributions  
in FLORIDA to date.

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 # F99000002095  
NAME JEFFERSON COMMUNITY HSG DEV. FNDTN., INC.  
STREET ADDRESS 4315 N. ROBERTSON STREET  
CITY-ST-ZIP NEW ORLEANS, LA 70117

STREET ADDRESS

CITY-ST-ZIP

400058961684  
08/25/05 01023 001 \*926 25

DOCUMENT # P98000075637  
NAME ESKO AFFORDABLE HOUSING - 97A, INC.  
STREET ADDRESS 340 ROYAL POINCIANA WAY, SUITE 305  
CITY-ST-ZIP PALM BEACH, FL 33480

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

G Barron Rush, Jr.

8/1/05

2813638705

Date

Daytime Phone #

STAPLE CHECK HERE