

APPLICATION FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR 27 PM 4:06

DO NOT WRITE IN THIS SPACE.

FOR  
LIMITED PARTNERSHIP  
*Annual Report 1998*  
DOCUMENT # A97000000622

1. Name of Limited Partnership

Village Square Apartments Limited Partnership

2. Mailing Address

980 N. Michigan Avenue

Suite, Apt. #, etc.

Suite 1675

City & State

Chicago

Zip

60611

Country

USA

3. Principal Office Address

3411 Clark Road

Suite, Apt. #, etc.

City & State

Sarasota, Florida

Zip

34231

Country

USA

4. Date Formed or Registered  
To Do Business in Florida

March 13, 1997

5. FEI Number

36-4140532

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

See 75 Additional Fee required  
for a Certificate of Status

7. State or Country of Formation

Florida

8a. Capital Contributions as Shown  
on Record:

\$1,205,000.00

8b. Amount of Capital Contributions in  
FLORIDA to date:

\$1,205,000.00

FEES: 1.)

Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

Corporation Service Company  
1201 Hays Street  
Suite 105  
Tallahassee, Florida 32301

10. If changed, new registered agent/office

Name

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

Suite, Apt. #, etc.

City

700002520307--9

-05/12/98--01054--008

\*\*\*\*526.25 \*\*\*\*526.25

FL

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

N/A

DATE

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

11. Names of General Partner(s)

Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration  
Document Number

VS Apartment Corporation

980 N. Michigan Avenue  
Suite 1675

Chicago, Illinois 60611

P97000022507

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

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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.

SIGNATURE

DATE

4/23/98

Typed or Printed Name of General Partner Signing Form

JULES MARLING

Telephone Number

312-587-1800

CR2E039 (12/97)

②

**ANNA MARIE ROMEO P.C.**

CERTIFIED PUBLIC ACCOUNTANT  
200 WEST ADAMS STREET  
SUITE 2215  
CHICAGO, ILLINOIS 60606

TELEPHONE (312) 558-4554  
FACSIMILE (312) 558-4520

April 24, 1998

State of Florida  
Division of Corporations  
Attn: Partnership Section  
409 East Gaines Street  
Tallahassee, Florida 32399

RE: Village Square Apartments Limited Partnership  
Document Number: A97000000622

Dear Sir/Madam:

This letter is in response to a notice dated April 15, 1998 (copy enclosed) that was received by Village Square Apartments Limited Partnership. The notice indicates that the State of Florida has revoked the Partnership's authority to transact business in Florida.

Enclosed is a completed "Application for Reinstatement for Limited Partnership" together with a check in the amount of \$526.25 which represents the applicable filing fee and a separate check in the amount of \$500.00 for late filing penalty.

The Partnership was organized to do business in the State of Florida on March 13, 1997 and, the first annual report was due April 8, 1998. The annual report was not timely filed because a preprinted annual report packet was not received from the State of Florida. Also, since this was the first annual report due, the Partnership management was not aware of the reporting requirement until the above-identified notice was received. This notice represents the first communication from the State of Florida regarding annual report filing requirements.

Based on the above information and, the prompt filing and payment upon receipt of the Revocation Notice dated April 15, 1998, I request that the \$500.00 penalty be abated and the check returned to the Partnership.

If you should have any questions, please contact the undersigned at (312) 558-4554.

Very truly yours,

*Anna Marie Romeo*

Anna Marie Romeo