

2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000181

FILED
Mar 24, 2005
Secretary of State

Entity Name: CROSSINGS AT UNIVERSITY ASSOCIATES, LTD.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD., PENTHOUSE II
CORAL GABLES, FL 33134

New Principal Place of Business:

2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134

Current Mailing Address:

2121 PONCE DE LEON BLVD., PENTHOUSE II
CORAL GABLES, FL 33134

New Mailing Address:

2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134

FEI Number: 65-0833738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST SECOND STREET
SUITE 2900
MIAMI, FL 33132130 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

Capital Contributions as Shown on record: 7,570,000.00

Amount of Capital Contributions in Florida to date: 7,570,000.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #: P98000004649

Name: CORNERSTONE CROSSINGS AT UNIVERSITY, INC.

Address: 2121 PONCE DE LEON BLVD., SUITE 650

City-St-Zip: CORAL GABLES, FL 33134

Address: 2121 PONCE DE LEON BLVD., PH

City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEON J. WOLFE

AR

03/24/2005

Electronic Signature of Signing General Partner

Date