

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

|                                                     |  |                                                                                   |
|-----------------------------------------------------|--|-----------------------------------------------------------------------------------|
| DOCUMENT # A98000000358                             |  |  |
| 1. Entity Name<br>SAND LAKE POINTE APARTMENTS, LTD. |  |                                                                                   |

FILED

07 MAY 18 AM 9:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



|                                                                                        |         |                                                                  |         |
|----------------------------------------------------------------------------------------|---------|------------------------------------------------------------------|---------|
| Principal Place of Business<br>800 NORTH HIGHLAND AVE., SUITE 200<br>ORLANDO, FL 32803 |         | Mailing Address<br>707 MENDHAM BLVD STE 201<br>ORLANDO, FL 32825 |         |
| 2. Principal Place of Business - No P.O. Box #                                         |         | 3. Mailing Address                                               |         |
| Suite, Apt. #, etc.                                                                    |         | Suite, Apt. #, etc.                                              |         |
| City & State                                                                           |         | City & State                                                     |         |
| Zip                                                                                    | Country | Zip                                                              | Country |

04062007 Chg-LP CR2E003 (12/06)

|                                                           |  |                                                        |
|-----------------------------------------------------------|--|--------------------------------------------------------|
| 4. FEI Number<br>58-2374776                               |  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> |  | \$8.75 Additional Fee Required                         |

|                                                                                                                                       |  |                                                                                                                                                                                                           |  |
|---------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent<br><br>LAGER, JILL<br>1665 PALM BEACH LAKES BLVD STE 400<br>WEST PALM BEACH, FL 33401 |  | 7. Name and Address of New Registered Agent<br>Name <u>LOUIS E. VOLT</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>707 MENDHAM BLVD. STE 201</u><br>City <u>ORLANDO</u> FL <u>32825</u> |  |
|---------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

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]* DATE 04/09/07

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, 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                     |                                                                                            | 13. ADDRESS CHANGES ONLY      |                                               |
|-----------------------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------|
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | L08000069623<br>BRM SAND LAKE POINTE, LLC<br>707 MENDHAM BLVD STE 201<br>ORLANDO, FL 32825 | STREET ADDRESS<br>CITY-ST-ZIP | 000103608810<br>05/31/07--01027--019 **500.00 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                            | STREET ADDRESS<br>CITY-ST-ZIP |                                               |

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]*, Mr. 04/09/07 401-377-0600  
BY: BRM SAND LAKE POINTE, LLC / LOUIS E. VOLT, MGR DATE