

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 MAR 16 AM 11:20



1. Name of Limited Partnership		1a. DOCUMENT # A98000001761
VICTORIA POINTE VENTURE LIMITED PARTNERSHIP		
Mailing Address 1175 S.E. 3RD AVENUE FORT LAUDERDALE FL 33316		Principal Office Address 1175 S.E. 3RD AVENUE FORT LAUDERDALE FL 33316
2. Mailing Address 1177 S.E. Third Ave. Suite, Apt. #, etc. City & State Fort Lauderdale, FL Zip 33316-1197 Country	2a. Principal Office Address 1177 S.E. Third Ave. Suite, Apt. #, etc. City & State Fort Lauderdale, FL Zip 33316-1197 Country	

AMENDED

3. Date Formed or Registered 07/23/1998	5a. Capital Contributions as Shown on record \$5,000.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date 8,063,626
4. State or Country of Formation FL	6. FEI Number 65-0851990 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent WACHS, JEFFREY S ESQ. 1175 S.E. 3RD AVENUE FORT LAUDERDALE FL 33316	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 1177 S.E. Third Ave. Suite, Apt. #, etc. City 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)

DATE

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

11. Name(s) of General Partner(s) AMERICAN APT. COMMUNITIES VI	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1175 S.E. 3RD AVENUE	11b. City, State & Zip Code FORT LAUDERDALE FL 33	11c. Registration/ Document Number P98000062362
---	--	--	---

400002810534 - 4  
03/18/99 - 01081 - 0013  
\*\*\*\*526.25 \*\*\*\*526.25

**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 Gary Kendrick, V.P. DATE 3/12/99

Typed or Printed Name of General Partner Signing Form Amer. Apt. Comm. Victoria Pt., Inc. Daytime Telephone Number (606) 263-4000

CR2E003 (12/98)