

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

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A98000001839**

**1. Entity Name**  
**TOWN CENTER PARTNERS, LTD.**



**Principal Place of Business**  
**770 NORTH DRIVE**  
**SUITE A**  
**MELBOURNE, FL 32934-9270**

**Mailing Address**  
**770 NORTH DRIVE**  
**SUITE A**  
**MELBOURNE, FL 32934-9270**



01172007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**59-3526337**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐

**\$8.75 Additional**  
**Fee Required**

**6. Name and Address of Current Registered Agent**

**JEFFERIES, BENJAMIN E**  
**770 NORTH DRIVE**  
**SUITE A**  
**MELBOURNE, FL 32934**

**DO NOT WRITE**  
**IN THIS SPACE**

**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**

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, Fee will be \$900.00**

U000000611285  
02/02/07-80055-009 500.00

**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**

**DOCUMENT #** P98000051208  
**NAME** BAYSIDE LAKES DEVELOPMENT CORPORATION  
**STREET ADDRESS** 770 NORTH DRIVE SUITE A  
**CITY-ST-ZIP** MELBOURNE, FL 32934

**DOCUMENT #**  
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**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/23/07  
Date

321-952-2814  
Daytime Phone #

STAPLE CHECK HERE