FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT **1999**

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

SECRETARY OF STATE DIVISION OF CORPORATIONS
99 JAN 22 AM 9: 16

1. Name of Limited Partnership

La Residences at Grey Oaks Limited Partnership

1a. DOCUMENT # A98000002660

Mailing Address: 3200 Bailey Lane, Suite 117, Naples, FL 34105

Principal Office Address: Same as mailing

3. Date Formed or Reg. Filed: 12/2/98 (9/11/98)

3a. Date of Last Report: N/A

4. State or Country of Formation: Florida

5a. Capital Contributions as Shown on record: $49,000.00

5b. Amount of Capital Contributions in FLORIDA to date:

2. Mailing Address: N/A
Suite, Apt #, etc
City & State
Zip Country

2a. Principal Office Address: N/A
Suite, Apt #, etc
City & State
Zip Country

6. FEI Number: ☑ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☐ **$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

R. Scott Price, Esq.
Kelly, Price, Passidomo, Siket & Solis
2640 Golden Gate Parkway
Suite 315
Naples, FL 34105

10. If changing to a Registered Agent/Office
Name: N/A
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt #, etc
City **FL** Zip Code

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) R. Scott Price, Esq. 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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration / Document Number
FLORIDA BAY PARTNERS, INC.	3200 BAILEY LANE SUITE 117	NAPLES, FL 34105	P98000093696

0000027703?5 --5
-02/09/99--01099--025
****431.75 ****431.75
343

CR2E003 (9/98)

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)(i), 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 effect as if made under oath. I further certify that I am a General Partner of the limited partnership or receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE DATE 12/15/98

Typed or Printed Name of General Partner Signing Form: NICK SHEPHERD, PRES. Daytime Telephone Number: 941-643-6767