

2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

FILED
May 06, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000000242

1. Entity Name
MAITLAND CONCOURSE PHASE I, LTD.



Principal Place of Business
**255 SOUTH ORANGE AVENUE, SUITE 905
 ORLANDO FL 32801**

Mailing Address
**P.O. BOX 1920
 DALLAS TX 75221**



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

1st MOORE CR2E003 (10/05)

4. FEI Number
75-2803079

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BATTAGLIA, W P
 100 LINCOLN AVENUE
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #	L99000000719	STREET ADDRESS	
NAME	BPL MAITLAND CONCOURSE PHASE I, LLC	CITY-ST-ZIP	
STREET ADDRESS	P.O. BOX 3010		
CITY-ST-ZIP	WINTER PARK FL 32790-3010		
DOCUMENT #	B99000000058	STREET ADDRESS	
NAME	LINCOLN PROPERTY COMPANY NO. 2363, LTD.	CITY-ST-ZIP	
STREET ADDRESS	255 SOUTH ORANGE AVENUE, SUITE 905		
CITY-ST-ZIP	ORLANDO FL 32801		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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CITY-ST-ZIP			

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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: *Leigh Ann Everett* **Leigh Ann Everett**
Assistant Secretary # 24-06 214-740-4440

STAPLE CHECK HERE