**FILED 2008 LIMITED PARTNERSHIP ANNUAL REPORT** Apr 16, 2008 08:00 Al Secretary of State Due By May 1, 2008 **DOCUMENT # B00000000017** 'HIGHLAND ASSOCIATES\OF GEORGIA, L.P. Principal Place of Business 1900 THE EXCHANGE 1900 THE EXCHANGE **SUITE 180** SUITE 180 ATLANTA, GA 34748 ATLANTA, GA 34748 02112008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 58-6357465 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BATTILLO, WILLIAM \$ DO NOT WRITE 23318 OAK PRAIRIE CIRCLE SORRENTO, FL 32776 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 little if applicable 1 F. H. FILE NOW!!! FEE IS \$500.00 , After May 1, 2008; 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. GENERAL PARTNER INFORMATION 12. F97000001094 DOCUMENT # VANGUARD ASSOCIATES, INC. NAME STREET ADDRESS 1900 THE EXCHANGE SUITE 180 CITY-S1-ZIP ATLANTA, GA 34748 DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE DOCUMENT / STREET ADDRESS

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:

CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENEL

4/10/08

Daytime Phone #