

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
May 11, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # B02000000150 | |
| 1. Entity Name UNIVERSITY HOUSE AT NORTHGATE LAKES LIMITED PARTNERSHIP | |



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|---|---|
| Principal Place of Business 3890 WEST NORTHWEST HWY., STE. 700 DALLAS, TX 75220 | Mailing Address 3890 WEST NORTHWEST HWY., STE. 700 DALLAS, TX 75220 |
|---|---|

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|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |



03102005 Chg-LP CR2E003 (10/03)

4. FEI Number
75-3054597

Applied For
Not Applicable

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

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| 6. Name and Address of Current Registered Agent CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL ST. TALLAHASSEE, FL 32303 |
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| 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

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|--|--|
| 9. Capital Contributions as Shown on record. \$10,000,000.00 | 10. Amount of Capital Contributions in FLORIDA to date |
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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 # | M02000001160 | STREET ADDRESS | |
| NAME | UHC GP, LLC | CITY-ST-ZIP | |
| STREET ADDRESS | 3890 WEST NORTHWEST HWY., STE. 700 | | |
| CITY-ST-ZIP | DALLAS, TX 75220 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
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| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

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05/11/05 00001-022 525.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Patt Cand 4/11/05 214-739-8141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Day/Time Phone #