

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B05000000175

**FILED**  
**Jan 23, 2007**  
**Secretary of State**

**Entity Name:** CABANA SOUTH BEACH APARTMENTS LP

**Current Principal Place of Business:**

1601 SW 51ST TERRACE  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

1301 PLANTATION ISLAND DRIVE S  
SUITE 304  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 16-1721196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

O'MALLEY, ANDREW M  
712 SOUTH OREGON AVENUE  
TAMPA, FL 32606 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P00000098481  
Name: CABANA SB OF GAINESVILLE  
Address: 4422 SOUTHWEST 85TH WAY  
City-St-Zip: GAINESVILLE, FL 32608

**ADDRESS CHANGES ONLY:**

Address: 7875 A1A SOUTH  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAVID H. FORT

GP

01/23/2007

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date