


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 26 AM 8:04

DOCUMENT # B06000000045 1. Entity Name TOWN CENTER CONDOS, L.P.					
Principal Place of Business 6363 WOODWAY, STE. 1000 HOUSTON, TX 77057				Mailing Address 6363 WOODWAY, STE. 1000 HOUSTON, TX 77057	
2. Principal Place of Business - No P.O. Box # 3411 RICHMOND AVE Suite, Apt. #, etc. SUITE 200 City & State HOUSTON TX Zip 77046		3. Mailing Address 3411 RICHMOND AVE Suite, Apt. #, etc. SUITE 200 City & State HOUSTON TX Zip 77046		03132008 Chg-LP CR2E003 (12/06)	
Country USA		Country USA		4. FEI Number 20-4153596	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
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.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F06000000468		STREET ADDRESS	3411 RICHMOND AVE SUITE 1000	
NAME	DC CONVENTIONAL - TOWN CENTER, INC.		CITY-ST-ZIP	HOUSTON TX 77046	
STREET ADDRESS	6363 WOODWAY, STE. 1000		STREET ADDRESS	000121199210	
CITY-ST-ZIP	HOUSTON, TX 77057		CITY-ST-ZIP	03/25/08--01023--006 **500.00	
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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 TOM CALTAGIRONE 18 MARCH 2008 832.209.1200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CHIEF OPERATING OFFICER OF DC CONVENTIONAL-TOWN CENTER INC,
 GENERAL PARTNER