

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # B93000000204

1. Entity Name

TG PARTNERS LIMITED PARTNERSHIP



Principal Place of Business

200 EAST LONG LAKE ROAD
BLOOMFIELD HILLS, MI 48304

Mailing Address

200 EAST LONG LAKE ROAD
BLOOMFIELD HILLS, MI 48304



04112006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

38-3080734

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
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 title if applicable

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

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05/03/06 09:05:023 150.00

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

DOCUMENT #

NAME

MICHIGAN, TG

STREET ADDRESS

200 EAST LONG LAKE ROAD

CITY - ST - ZIP

BLOOMFIELD HILLS, MI 48304

DOCUMENT #

NAME

G99208900061

STREET ADDRESS

TAUBMAN REALTY VENTURES

CITY - ST - ZIP

200 EAST LONG LAKE ROAD
BLOOMFIELD HILLS, MI 48304

DOCUMENT #

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STREET ADDRESS

CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Jeffrey M. Davidson

4/14/06

STAPLE CHECK HERE