

**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 14 AM 8:07

1. Name of Limited Partnership

1a. DOCUMENT #
B98000000114

TERRAPIN STATION LIMITED PARTNERSHIP



02/21

Mailing Address

Principal Office Address

~~G/O LEFMARK FLORIDA, INC.~~
~~648 BRICKELL AVE., SUITE 1120~~
~~MIAMI FL 33131~~

~~G/O LEFMARK FLORIDA, INC.~~
~~648 BRICKELL AVE., SUITE 1120~~
~~MIAMI FL 33131~~

3. Date Formed or Registered

02/23/1998

5a. Capital Contributions as
Shown on record.

\$250,000.00

3a. Date of Last Report

n/a

5b. Amount of Capital
Contributions in FLORIDA
to date.

4. State or Country of Formation

DE

6. FEI Number

65-0807705

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired



\$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

One Greenway Plaza

2a. Principal Office Address

2601 S. Bayshore Drive

Suite, Apt. #, etc.

Suite 850

Suite, Apt. #, etc.

Suite 300-A

City & State

Houston, TX

City & State

Miami, FL

Zip

Country

77046

Zip

Country

33133

9. Name and Address of Current Registered Agent

COBER CORPORATE AGENTS, INC.
2601 SOUTH BAYSHORE DRIVE, 19TH FLOOR
MIAMI FL 33133

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

LEF/SPRINGSGATE VILLAGE, LTD

848 BRICKELL AVE., SU

MIAMI FL 33131

A97000002575

400002722684--0
-12/24/98--01109--017
****535.00 ****535.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

LEF/Springsgate Village, Inc., General Partner of
LEF/Springsgate Village, Ltd., General Partner of Terrapin Station Limited Partnership

SIGNATURE

Sandra E. Ray

DATE

12/09/98

Typed or Printed Name of General Partner Signing Form

Sandra E. Ray, Vice-President

Daytime Telephone Number

713-850-1850

CR2E003 (8/98)