

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # B99000000193

1. Entity Name
FOREST GLEN GOLF COMMUNITY LIMITED
PARTNERSHIP



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUL 18 AM 11:24

Principal Place of Business
13155 NOEL ROAD, SUITE 2400
DALLAS, TX 75240

Mailing Address
C/O THE CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON, DE 19801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03022005

Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

59-3521047

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$1,500,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # M99000000694
NAME WESTBROOK FOREST GLEN, L.L.C.
STREET ADDRESS 13155 NOEL ROAD, SUITE 2400
CITY-ST-ZIP DALLAS, TX 75240

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # P97000048233
NAME RONTO GOLF ESTATES, INC.
STREET ADDRESS 3185 HORSESHOE DRIVE SOUTH
CITY-ST-ZIP NAPLES, FL 34104

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
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CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 #

JAMES M. GENDERS

200057972022
07/27/05--01046--012 **526.25

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