

Filing Fee \$15

SUBMIT IN DUPLICATE!

96505999

File # S006716

Assigned by
Secretary of State

FILING DEADLINE IS
PRIOR TO

DEPT-01 RECORDING \$23.00
T40010 TRAN 5310 07/01/96 16:47:00
#5528 # AB *-96-505999
COOK COUNTY RECORDER

5006716 SOSIL 06/10/96
15.00 HM 0000092645 FILED

month, day, year

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope with prepaid postage is included.

GEORGE H. RYAN
SECRETARY OF STATE
STATE OF ILLINOIS

BIENNIAL RENEWAL REPORT
(Illinois or foreign limited partnership)

DO NOT MAKE CHANGES ON THIS FORM. IF CHANGES ARE NECESSARY, AMENDMENT FORM LP 202 (ILLINOIS) OR LP 905 (FOREIGN) AND THE \$25 FEE IS REQUIRED.

- Limited partnership's name: Garden Tanglewood, L.P.
- Address of office where records required by Section 104 (Illinois) or Section 902 (foreign) are kept (P.O. Box alone & c/o are unacceptable):
12221 Merit Drive, Ste. 600, Dallas, TX 75251
- File number assigned by the Secretary of State: S006716
- Federal Employer Identification Number (F.E.I.N.): 363852699 96505999
- Assumed name, if any: N/A.
- Admitting name, if any (foreign only): _____
- Registered agent
First name The Prentice-Hall Middle name Information System, Inc. Last name _____
Registered Office: (P.O. Box alone and c/o are unacceptable)
Number 33 North LaSalle Street Suite# _____
City Chicago County Cook State Illinois Zip Code 60602
- State of jurisdiction: Delaware, if foreign, that this limited partnership is validly existing as a limited partnership under the laws of Delaware as of this date and that it still exists in Illinois.

2300

Form LP 1108
(Rev. Jan. 1995)

UNOFFICIAL COPY

I affirm that any entity serving as a general partner for this limited partnership is in good standing in its home state.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

Renewal report must be signed by a general partner.

Signature Carol Williams

Type or print name and title Carol Williams, Treasurer

Name of General Partner if a corporation or other entity _____

Garden Capital, Incorporated 5706-560-5

(Signature must be in **BLACK INK** on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

FORMS OF PAYMENT:

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State." **DO NOT SEND CASH!**

RETURN TO:

Secretary of State
Department of Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8960

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BOX 170