2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUL 18 PM 1:00

DOCUMENT # A06000000297

1. Entity Name
RED-PALMETTO ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126-~~4677~~	703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126-~~4677~~

06202007 Chg-LP CR2E003 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
703 Waterford way	703 Waterford way
Suite, Apt. #, etc.: Suite 800	Suite, Apt. #, etc.: Suite 800
City & State: Miami, FL.	City & State: Miami, Fl.
Zip: 33126 Country:	Zip: 33126 Country:

4. FEI Number 56-2561598 ☐ Applied For ☐ Not Applicable

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
STOSIK, VICTOR L 703 WATERFORD WAY, SUITE 800 MIAMI, FL 33126-~~4677~~ —— ~~change~~ only →	Name: (P.O. Box Number is Not Acceptable) 703 Waterford way Suite 800 City Miami FL Zip Code 33126

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

FILE NOW!!! FEE IS $500.00
Due by September 14, 2007

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	P96000034735	STREET ADDRESS	703 waterford way Suite 800
NAME	NEWCASTER DEVCORP, INC.		
STREET ADDRESS	703 WATERFORD WAY, SUITE 800	CITY-ST-ZIP	Miami, Fl. 33126
CITY-ST-ZIP	MIAMI, FL 33126~~4677~~		
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STAPLE CHECK HERE

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] 6/20/07 305-261-4330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Douglas H. Padgett, Treasurer, Newcaster Devcorp Inc.