

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 MAR 27 AM 9:19

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # A06000000369

1. Entity Name
STIRLING HOTEL DANIA BEACH, LTD.

Principal Place of Business
 880 S. PLEASANTBURG DRIVE, SUITE 3-G
 GREENVILLE, SC 29607

Mailing Address
 880 S. PLEASANTBURG DRIVE, SUITE 3-G
 GREENVILLE, SC 29607

2. Principal Place of Business - No P.O. Box #

60 Pointe Circle

Suite, Apt. #, etc.

3. Mailing Address

60 Pointe Circle

Suite, Apt. #, etc.

City & State
Greenville SC

Zip
29615

Country

City & State
Greenville SC

Zip

29615

Country

03012007 Chg-LP CR2E003 (12/06)

4. FEI Number
20-4480949

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CUROTTO, DONALD J
 300 S. ORANGE AVE., SUITE 1000
 ORLANDO, FL 32801

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00

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 # **M06000002293**
 NAME **SAKA INVESTMENTS, LLC**
 STREET ADDRESS **880 S. PLEASANTBURG DRIVE, SUITE 3-G**
 CITY-ST-ZIP **GREENVILLE, SC 29607**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **60 Pointe Circle**
 CITY-ST-ZIP **Greenville, SC 29615**

STREET ADDRESS
 CITY-ST-ZIP

000095699220
04/03/07--01054--020 **500.00

STREET ADDRESS
 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 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: **Jayanti P. Radia** **JAYANTI P. RADIA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

3/27/07 864 232944