


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Feb 26, 2007 08:00 AM
Secretary of State**

DOCUMENT # A23510 1. Entity Name COTTAGE HILL, LTD.	
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Principal Place of Business 516 LAKEVIEW ROAD, VILLA 8 CLEARWATER, FL 33756	Mailing Address 516 LAKEVIEW ROAD, VILLA 8 CLEARWATER, FL 33756
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DO NOT WRITE IN THIS SPACE

01192007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-2804632	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FLYNN, THOMAS F 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756-3302
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**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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**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 #	P98000081966
NAME	CANTONMENT THREE, INC.
STREET ADDRESS	516 LAKEVIEW ROAD, UNIT 8
CITY-ST-ZIP	CLEARWATER, FL 337563302
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000650294
03/08/07-80007-011 508.75

**DO NOT WRITE
IN THIS SPACE**

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: 	KEVIN T. FLYNN	2/15/07	727-449-1182
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<small>Date</small>	<small>Daytime Phone #</small>

**As Vice-President of
Corporate General Partner**

STAPLE CHECK HERE