


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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

07 JAN 24 AM 8:18

DOCUMENT # A92000000040 1. Entity Name THE COLDBROOKE LIMITED PARTNERSHIP	
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Principal Place of Business 20320 FAIRWAY OAKS DR., 331 BOCA RATON, FL 33434	Mailing Address 20320 FAIRWAY OAKS DR., 331 BOCA RATON, FL 33434
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01102007 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0359306	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  MAHLER, I. KENNETH 20320 FAIRWAY OAKS DR., 331 BOCA RATON, FL 33434
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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 \_\_\_\_\_ 500086232795  
Signature, typed or printed name of registered agent and title if applicable. 01/25/07 01040 034 \*\*508.75

**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 #	F9200000150
NAME	COLDBROOKE, INC.
STREET ADDRESS	6 EXECUTIVE DRIVE 20320 Fairway Oaks Dr.
CITY-ST-ZIP	EARMINGTON, CT 06032 Boca Raton, FL 33434
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:** I. Kenneth Mahler 1/16/07 7214700940  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE