

# 2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B02000000199

Entity Name: OTTO BOCK HEALTHCARE LP

FILED  
Mar 19, 2007  
Secretary of State

**Current Principal Place of Business:**

TWO CARLSON PARKWAY SUITE 100  
PLYMOUTH, MN 55447

**New Principal Place of Business:**

**Current Mailing Address:**

TWO CARLSON PARKWAY SUITE 100  
PLYMOUTH, MN 55447

**New Mailing Address:**

FEI Number: 74-3032515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: F02000002868  
Name: OTTO BOCK HEALTHCARE U.S., INC.  
Address: TWO CARLSON PARKWAY SUITE 100  
City-St-Zip: PLYMOUTH, MN 55447

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN A. CARR

\_\_\_\_\_ Electronic Signature of Signing General Partner

MR.

03/19/2007

\_\_\_\_\_ Date