

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # A06000001537	
1. Entity Name LARGO COMMERCE GP, LP	
Principal Place of Business 8000 TOWERS CRESCENT DRIVE, #825 VIENNA, VA 22182	Mailing Address 8000 TOWERS CRESCENT DRIVE, #825 VIENNA, VA 22182



DO NOT WRITE IN THIS SPACE

04162008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3615757	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MCNAMARA, THOMAS P
2907 BAY TO BAY BLVD., SUITE 201
TAMPA, FL 33629**

**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 _____

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

DATE _____

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 #	L06000121205
NAME	LARGO COMMERCE GP 2007, LLC
STREET ADDRESS	8000 TOWERS CRESCENT DRIVE, #825
CITY-ST-ZIP	VIENNA, VA 22182
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**U000000943568
05/23/08-80085-011 500.00**

**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: _____

Signature and typed or printed name of signing general partner

Date

Daytime Phone #

ROBERT P. FRANKEN 6/28/08 703-506-1006

STAPLE CHECK HERE