2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

SIGNATURE AND TYPED

R PRINTED NAME OF SIGNING GENERAL PÄRTNER

FILED Jan 25, 2007 08:00 A DOCUMENT # A0000001882 1. Entity Name **Secretary of State** KDW PARTNERSHIP, LTD. Principal Place of Business Mailing Address 4 OCEANS W BLVD. 4 OCEANS W BLVD. SUITE 204B DAYTONA BEACH SHORES FL 32118 SUITE 2048 DAYTONA BEACH SHORES FL 32118 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, ctc. Suito, Apt # etc. 1st MOORE CR2E003 (10/06) City & State City & State 4. FEI Number Applied For 59-3745824 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo WILLIAMS, STANLEY G 4 OCEANS W BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 204B DAYTONA BEACH SHORES FL 32118 Zip Code City 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 Sustanting typed or printed name of registered agent and title if applicable DATE FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. DOCUMENT # P99000006701 SIBLE LAUDRESS NAM PELICAN ENTERPRISES TEAM, INC. SHYLL ADDRESS 4 OCEANS W BLVD. CHY SI ZIP CITY ST 71P DAYTONA BEACH SHORES FL 32118 DOCUMENT # STREET ADDRESS U00000804446 <u> 01/29/07-80054-008 508.75</u> SINGEL ADDRESS CITY ST-712 CITY ST ZIP DOCUMENT # STREET ADDRESS MAN STREET ADDRESS CHY ST-782 CHY ST-40 DOCUMENT A STREET ADDRESS. STREET ADDRESS CITY ST 78P CITY ST 71P DOCUMENT # STREET ADDRESS STREET ADDRESS CHY ST 7IP CITY SE AP DOCUMENT # STREET ADDRESS NAM STREET ADDRESS CITY-ST ZIP CHY ST ZIP 14. I horeby 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 eath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this region as the policy of the properties of the limited partnership or the receiver or trustee empowered to execute this region by Chapter 620, Florida Statutes

386-760-0192

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