2007 LIMITED PARTNERSHIP ANN JAL REPORT Due By May 1, 2067

SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT # A01000001626** 07 FEB 12 AM 9: 29 GREENFIELD O'HANA LIMITED PARTNERSHIP Principal Place of Business Mailing Address 2230 N.W. 23RD WAY 2230 N.W. 23RD WAY BOCA RATON, FL 33431 BOCA RATON, FL 33431 01242007 No Chq-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0550474 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GREENFIELD O'HANA, LLC 2230 N.W. 23RD WAY BOCA RATON, FL 33431 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 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # GREENFIELD O'HANA, Margaret Greenfield NAME STREET ADDRESS 2230 N.W. 23RD WAY MGR. CHY SI ZIP BOCA RATON, FL 33431 100088444811 02/15/07--01037--001 **508.75 DOCUMENT 6 STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP DOCUMENT

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14. I hereby certify that the information supplied with this filing does not quality 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

NAME STREET ADDRESS CITY ST ZIP