

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

**FILED**  
**Apr 27, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A02000000149**

1. Entity Name  
**PENSION 1800 ASSOCIATES, LLLP**



Principal Place of Business  
**4800 LE JEUNE RD  
CORAL GABLES, FL 33146**

Mailing Address  
**4800 LE JEUNE RD  
CORAL GABLES, FL 33146**



01102007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

**01-0583728**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**STORACE, MICHAEL R  
4800 LE JEUNE RD  
CORAL GABLES, FL 33146**

**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, 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 # **L02000002349**  
NAME **PENSION 1800 INVESTORS, L.L.C.**  
STREET ADDRESS **4800 LE JEUNE RD**  
CITY-ST-ZIP **CORAL GABLES, FL 33146**

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U000000739183  
05/14/07-80015-009 500.00

**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  
**Pension 1800 Investors, L. L. C., as General Partner**

**SIGNATURE:** BY: Wayne K. Masur Wayne K. Masur, as Manager 4/25/07 (954) 302-6788

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #