2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT #A0200000542 1. Entity Name CAMELLIA POINTE, LTD. Principal Place of Business Mailing Address					FILED 07 MAY 18 PM 4: 1° SECRETARY OF STATE TALLAHASSEE, FLORIDA		
800 NORTH HIGHLAND AVE., SUITE 200 707 MENDHAM BLVD S ORLANDO, FL 32803 ORLANDO, FL 32825					 	H BARN BOOK SIIN BIJIN KATAN BI WA	
Principal Place of Business - No P.O. Box # 3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04062007 Chg-LP	CR2E003 (12/06)		
City & State	•	City & State		4. FEI Number 04-3641319	Applied For Not Applicable		
Zip	Country	Country Zip Cou		try	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Name and Address of Current Registered Agent					7. Name and Address of New Regi	stered Agent	
LAGER, JILL 1665 PALM BEACH LAKES BLVD STE 400 WEST PALM BEACH, FL 33401				Name LOUIS E. YOUT			
				Street Address (P.O. Box Number is Not Acceptable)			
Victor Country Design (1) 1 Cooper				101 MENDHAM BLVO. STEXOI			
				City C	RLANDO	FL ZESSON	
The above the obligat	named entity submits this matement for its or registered agent.	or the purpose of changing its	registere	ed office or register	red agent, or both, in the State of Florida	a. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable					04/	09/07 DATE	
FILE NOWIII 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 amenda 12. GENERAL PARTNER INFORMATION 13.						eral partner.	
DOCUMENT #	DOMENT# 1.06000069577			ET ADDRESS			
NAME STREET ADORESS	BRM CAMELLIA POINTE, LLC. ADDRESS 707 MENDHAM BLVD STE 201			ET ADORESS	300103627853 05/31/0701048009 **500.00		
CITY-ST-ZIP	ST-ZIP ORLANDO, FL 32825		СПУ	77Y-ST-ZIP 0.57/ 517/ 51 610/10 650 444/555-50			
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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							
ı	Nicos	- 12h	m	71 -	7/05/07	401-311-0600	
BY BEM CAMELIA FOINTE, WELLOWIS E. VOLT, NIEL DATE							