

# 2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000858

Entity Name: FIELDS OF DREAMS, LTD.

FILED  
Feb 13, 2007  
Secretary of State

**Current Principal Place of Business:**

1172 S. HARBOR DRIVE  
SINGER ISLAND, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

1172 S. HARBOR DRIVE  
SINGER ISLAND, FL 33404

**New Mailing Address:**

FEI Number: 02-0632490

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HEINE, CHRIS A  
1172 S. HARBOR DRIVE  
SINGER ISLAND, FL 33404 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: P00000103016  
Name: C.H. CONSULTING, INC.  
Address: 1172 S. HARBOR DRIVE  
City-St-Zip: SINGER ISLAND, FL 33404  
Document #:  
Name: SILAS, BILLY  
Address: 1250 GATEWAY RD.  
City-St-Zip: LAKE PARK, FL 33403

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CHRIS HEINE PRES C.H. CONSULTING, INC.

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02/13/2007

\_\_\_\_\_ Electronic Signature of Signing General Partner

\_\_\_\_\_ Date