2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Jan 25, 2008 08:00 AM **DOCUMENT # A03000000122** Secretary of State SUSAN SCOTT ENTERPRISES, LLLP Principal Place of Business Mailing Address 10624 N.W. 225-A 11191 SW 60 AVENUE OCALA, FL 34482 PINECREST, FL 33156 01142008 No Cha-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILLIAM D. SOMAN, P.A. DO NOT WRITE 11191 SW 60 AVENUE PINECREST, FL 33156 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. 1 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 NOWIII FEE IS \$500.00 After May 1, 2008, 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. L05000049899 DOCUMENT # NWTR, LLC STREET ADDRESS 11191 SW 66 AVENUE CITY-ST-ZIP PINECREST, FL 33156 U00000794413 DOCUMENT # 01/28/08-80007-001 500.00 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-7(P IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

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

SIGNATURE:

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STAPLE CHECK

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

> WILLIAM D. SIMAU MANAGER TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

786,268-1254