## 2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

## **FILED** Apr 27, 2007 08:00 A Secretary of State DOCUMENT # A03000000186 1. Entity Name **GLADES PARTNERS LIMITED** Principal Place of Business Mailing Address 1515 NORTH FEDERAL HIGHWAY 1515 NORTH FEDERAL HIGHWAY SUITE 306 SUITE 306 **BOCA RATON FL 33432 BOCA RATON FL 33432** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/06) City & State City & State 4. FEI Number Applied For 06-1678483 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GENSHEIMER, MARK A Street Address (P.O. Box Number is Not Acceptable) 1515 NORTH FEDERAL HIGHWAY SUITE 306 **BOCA RATON FL 33432** City Zip Code 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 agont and title if applicable. DATE FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2007, fee will be \$900. \*\*\* Make check payable to Florida Department of State. 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 ADDRESS CHANGES ONLY 12. DOCUMENT # P03000013830 STREET ADDRESS NAME GLADES PARTNERS, INC. STREET ADDRESS 1515 NORTH FEDERAL HIGHWAY, SUITE 306 CITY-ST-ZIP CITY- S1-7IP **BOCA RATON FL 33432** 000000739139 05/14/07-80012-016 500.00 DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CHY+SI-7iP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CULY-SE-71P CITY-S1-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADORESS CHY-ST-7/P CITY-ST-ZIP DOCUMENT # STRIEET ADDRESS NAME STREET ADDRESS CITY - ST- ZIP CITY-SI-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-S1-ZIP CITY-SI-7IP 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 eath; 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

Mark A. Gensheimer, President

Glades Partners, Inc. General Partner

Glades Partners Limited