2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 14, 2007

DOCUMENT #A0300001055

FILED Sep 11, 2007 08:00 AM Secretary of State

1. Entity Name GRIFFIN INVESTMENTS, LTD.						v
31493 WARNER ST.	Mailing Address 31493 WARNER ST. BIG PINE KEY, FL 33043	**************************************				
· · · · · · · · · · · · · · · · · · ·		The Confidence of States	i (# E #}) i	7 No Chg-LP		003 (12/06)
DO NOT WRITE II	N THIS SPA	CE	4. FEI Nun 20-00	nber 164814		Applied For Not Applicable
			5. Certifica	ate of Status Desired		\$8.75 Additional Fee Required
6. Name and Address of Current Regi	stered Agent	-				, conserved
FIELDER, LYNNE H ESQ 19980 OVERSEES HIGHWAY			DO NOT WRITE			
SUGARLOAF KEY, FL 33042			IN THIS SPACE			
The above named entity submits this statement for the the obligations of registered agent.	purpose of changing its registe	red office or registers	ed agent, or t	both, in the State of Fk	orida, I am i	familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title	il applicable.	<u></u>			DATE	
FILE NOW!!! FEE IS \$	500 .00	· · · · · · · · · · · · · · · · · · ·	<u> </u>	In accordan	ce with s. (607.193(2)(b), F.S., did not receive the

Due by September 14, 2007

the limited partnership did not receive the prior notice.

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.

ŀ							
l	12.	GENERAL PARTITER INFORMATION					
	DOCIMENT # NAMF STREET ADDRESS CITY-ST-ZIP	L03000023835 GRIFFIN OPERATIONS, LLC 31493 WARNER ST. BIG PINE KEY, FL 33043					
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP						
	DOCUMENT / NAME STREET ADDRESS						

U00000773646 03/11/07-80001-006 500.00

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 spall have the same legal effect as it 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

CITY-ST-ZIP

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

STREET ADDRESS CITY-ST-ZIP DOCUMENT #

STREET ADDRESS CITY-ST-ZIP

STAPLE CHECK