2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# A04000000051

Entity Name: STROPHIC LIMITED PARTNERSHIP

Current Principal Place of Business:

8515 S.W. 23RD PLACE
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

8515 SOUTH WEST 23RD PLACE
GAINESVILLE, FL 32607

New Mailing Address:

8515 S.W. 23RD PLACE
GAINESVILLE, FL 32607

FEI Number: 55-0855836 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

HABIB FILHO, TUFFY N
8515 S.W. 23RD PLACE
GAINESVILLE, FL 32607 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 #:
Name: HABIB FILHO, TUFFY N TRUSTEE
Address: 8515 S.W. 23RD PLACE
City-St-Zip: GAINESVILLE, FL 32607

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TUFFY N. HABIB FILHO MR 06/16/2009

Electronic Signature of Signing General Partner — Date