2007 LIMITED PARTNERSHIP ANNUAL REPORT

FILED May 09, 2007 08:00 A Secretary of State **Due By May 1, 2007 DOCUMENT # A04000001889** A-1 CLOSINGS, LTD. Principal Place of Business Mailing Address P.O. BOX 763 **601 LITHIA PINECREST RD** BRANDON, FL 33509 BRANDON, FL 33511 05012007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1736000 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITE, DONELLE A ESQ DO NOT WRITE 601 LITHIA PINECREST RD BRANDON, FL 33511 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. I 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 NOW!!! FEE IS \$500.00 After May 1, 2007, 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. P07000049011 W SQUARED, INC. NAME U00000763057 05/29/07-80039-003 500.00 STREET ADDRESS 601 LITHIA PINECREST RD CITY-ST-ZIP BRANDON, FL 33511 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # 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:

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER