

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Apr 27, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A05000000020**

1. Entity Name  
**STUTT GART HOLDINGS, LLLP**



Principal Place of Business  
**1800 SOUTH OCEAN BLVD., #707**  
**LAUDERDALE BY THE SEA, FL 33062**

Mailing Address  
**1800 SOUTH OCEAN BLVD., #707**  
**LAUDERDALE BY THE SEA, FL 33062**



04182007 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-2691724</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**DEGOLLADA, EUGENIO**  
**1800 SOUTH OCEAN BLVD., #707**  
**LAUDERDALE BY THE SEA, FL 33062**

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>DEGOLLADA, EUGENIO</b> <b>1800 SOUTH OCEAN BLVD., #707</b> <b>LAUDERDALE BY THE SEA, FL 33062</b>
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 05/14/07-80022-005 500.00

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:** *Eugenio Degollada* **EUGENIO DEGOLLADA** **4-20-07** **954-784-4145**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE