


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

<b>DOCUMENT # A05000000105</b> 1. Entity Name <b>MAINSTREET PB LAKES, LTD.</b>	
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**FILED**  
 2007 MAY 10 AM 10:41  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business <b>ONE FINANCIAL PLAZA, SUITE 2212          FORT LAUDERDALE, FL 33394</b>	Mailing Address <b>ONE FINANCIAL PLAZA, SUITE 2212          FORT LAUDERDALE, FL 33394</b>
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2. Principal Place of Business - No P.O. Box # <b>2101 W. Commercial</b> Suite, Apt. #, etc. <b>1200</b>	3. Mailing Address <b>2101 W. Commercial</b> Suite, Apt. #, etc. <b>1200</b>
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02082007 Chg-LP CR2E003 (12/06)

City & State <b>Fort Lauderdale FL</b>	City & State <b>Fort Lauderdale, FL</b>
Zip <b>33309</b>	Zip <b>33309</b>
Country	Country

4. FEI Number <b>APPLIED FOR</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>MAINSTREET PB LAKES, INC.          ONE FINANCIAL PLAZA, SUITE 2212          FORT LAUDERDALE, FL 33394</b>
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>2101 W. Commercial</b> <b>Suite 1200</b> City <b>Fort Lauderdale FL 33309</b>
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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 #	<b>P05000004764</b>
NAME	<b>MAINSTREET PB LAKES, INC.</b>
STREET ADDRESS	<b>ONE FINANCIAL PLAZA, SUITE 2212</b>
CITY-ST-ZIP	<b>FORT LAUDERDALE, FL 33394</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>2101 W. Commercial</b>
CITY-ST-ZIP	<b>Suite 1200 Fort Lauderdale FL, 33309</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

**000102728050**  
 05/17/07 01039 002 \*\*508.75

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: \_\_\_\_\_ **4/27/07** **954-717-9066**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE