

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Apr 25, 2007  
Secretary of State**

DOCUMENT# A05000000604

Entity Name: MATTHEWS MCAP FAMILY, LTD.

**Current Principal Place of Business:**

9897 N SPRINGS WAY  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

9897 N SPRINGS WAY  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 59-3789632      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEGEL, LARRY  
800 W CYPRESS CREEK RD, STE 470  
FT LAUDERDALE, FL 33309 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: MATTHEWS, ROBERT R  
Address: 9897 N SPRINGS WAY  
City-St-Zip: CORAL SPRINGS, FL 33076  
Document #:  
Name: MATTHEWS, MARY K  
Address: 9897 N SPRINGS WAY  
City-St-Zip: CORAL SPRINGS, FL 33076

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
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: ROBERT R. MATTHEWS

MR.

04/25/2007

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date