2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # A05000000889

1. Entity Name
OLYMPUS LAKELAND, LTD.



Principal Place of Business

1900 W. COMMERCIAL BLVD., SUITE 200 FT. LAUDERDALE, FL 33309

Mailing Address

1900 W. COMMERCIAL BLVD., SUITE 200 FT. LAUDERDALE, FL 33309

FILED Apr 22, 2008 08:00 AN Secretary of State



03112008 No Chg-LP

CR2E003 (12/06)

4.	FEI Number	Applied For
	20-2786085	Not Applicable
5.	Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its recons of registered agent.	gistered office or registered agent, or both,	n the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.		DATE		
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.0	0			
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 #	P05000063224				
NAME	KEENAN OLYMPUS, INC.				
STREET ADDRESS	1900 W. COMMERCIAL BLVD., SUITE 200				
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309		U00000914367		
DOCUMENT #	P05000063241	(/5/08/08-80054-012 500.00		
NAME	KEISER OLYMPUS, INC.				
STREET ADDRESS	1900 W. COMMERCIAL BLVD., SUITE 175				
CITY - \$1 - ZIP	FT. LAUDERDALE, FL 33309		•		
DOCUMENT #					
NAME					
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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

OLYMPUS LAKECAND LTD.

SIGNATURE: ___

STAPLE CHECK HERE

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

March 31, 2008

(954) 776-6700

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Date

Daytime Phone #