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

DOCUMENT # A0500000940					FIL	FD
1. Entity Name NEWPORT CENTER PLAZA, LTD.				200		AM 10: 54
Principal Place of Business Mailing Address 6820 LYONS TECHNOLOGY CIRCLE, #100 6820 LYONS TECHNOLOG COCONUT CREEK, FL 33073 COCONUT CREEK, FL 330			LE, #100	SE TAL	ECRETARY LAHASSE	OF STATE E. FLORIDA
Principal Place of Business - No P.O. Box #     Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.				03292007 Chg-LP CR2E003 (12/06)		
City & State City & State				4. FEI Number Applied For 03-0561688 Not Applied by		
Zip Country	Zip Country		У		1 Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent Name			
BUTTERS, MALCOLM 6820 LYONS TECHNOLOGY CIRCLE, #100 COCONUT CREEK, FL 33073			Street Address (P.O. Box Number is Not Acceptable)			
		City				<b>□1</b> Zip Code
The above named entity submits this statement for the purpose of changing its		ts registered	FL   1			
the obligations of registered agent.  SIGNATURE						
Signature, typed or printed name of registered liger	WIII FEE IS \$500.00					DATE
After May 1,	2007, Fee will be \$90 THAT IS A BUSINESS E		IST RE DECIST	ERED AND AC	TIVE WITH T	HIS OFFICE
NOTE: General Partners M	AY NOT be changed on	the form;	an amendmen	t must be filed	to change a	general partner.
12. GENERAL PARTNER INFORMATION  00CUMENT # L05000046682		13.	T ADDRESS		ADDRESS CF	HANGES ONLY
NAME NEWPORT CENTER PLAZA GI STREET ADDRESS 6820 LYONS TECHNOLOGY C CITY-ST-ZIP COCONUT CREEK, FL 33073	· ·	CITY-S		<b></b>	10101	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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	that my signature shall have this report as required by C	e the same l Chapter 620,	legal effect as if m Florida Statutes	d in Chapter 119, ade under oath;	that I am a Gene	. I further certify that the information or all Partner of the limited partnership.
SIGNATURE:	Malcol	m Du	H2D	7	ו טעיון	101000M