2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Feb 05, 2007 08:00 AM Secretary of State

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1. Entity Name

CASHMERE PLAZA, LTD.



Principal Place of Business

210 SUNSET BAY COURT PALM BEACH GARDENS, FL 33418 Mailing Address

210 SUNSET BAY COURT PALM BEACH GARDENS, FL 33418



DO NOT WRITE IN THIS SPACE

01122007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-2995921

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WELLER, GLENN R 210 SUNSET BAY COURT PALM BEACH GARDENS, FL 33418-USA

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 Signature, typed or printed name of registered egent and title if applicable | | | DATE | | | |
| File NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 | | 0 | i | | | |
| 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 | · · · · · · · · · · · · · · · · · · · | 1 | | |
| | DOCUMENT / | P05000078811 | | \ | | |
| 1 | NAME | SOUTHCAP CASHMERE PROPERTIES, INC. | | į | | |

DOCUMENT # PO5000078811

NAME SOUTHCAP CASHMERE PROPERTIES, INC.

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # NAME

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # DOCU

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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/12/07

Daytime Phone #