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

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #A05000001517**

1. Entity Name

SOFRAN DAVENPORT PHASE II, LTD.



FILED Feb 02, 2007 08:00 A Secretary of State

Principal Place of Business

818 A-1-A NORTH, STE. 203 PONTE VEDRA BEACH, FL 32082 Mailing Address

818 A-1-A NORTH, STE. 203 Ponte Vedra Beach, FL 32082



01052007 No Chg-LP

CR2E003 (12/06)

280-0008

4. FEI Number 20-3280025 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROULEAU, ROBERT 818 A-1-A NORTH, STE. 203 PONTE VEDRA BEACH, FL 32082

STAPLE CHECK HERE

SIGNATURE:

## 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 agent and title if applicable.		DATE
··· <del>-</del>	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 /	P00441	
NAME	THE SOFRAN CORPORATION .	
STREET ADDRESS	818 A-1-A NORTH, STE. 203	•
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
DOCUMENT #		Hecoeca cox o
NAME		U00000619212
STREET ADDRESS		02/08/07-80061-022 500.00
CITY-ST-ZIP		
DOCUMENT #		
NAME		
STREET ADDRESS		DO NOT WRITE
City-ST-ZIP		<del></del>
DOCUMENT /		IN THIS SPACE
NAME		
STREET ADDRESS		
CHY-SI-ZIP		
DOCUMENT /		
NAME		<b>;</b>
STREET ADDRESS		
CITY-ST-ZIP	<b>l</b>	
DOCUMENT /		
NAME	<b>.</b>	
STREET ADDRESS		
CHY-ST-ZIP		
	20 At 1 At	tions contained in Chapter 118 Florida Statutas I buther pathly that the information
14. I hereby certify that the information supplied with this fitting 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		

Robert Rouleau