

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001769

**FILED**  
**Feb 05, 2012**  
**Secretary of State**

**Entity Name:** BLUE SPHERE DEERFIELD PLAZA LTD.

**Current Principal Place of Business:**

12720 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 56855  
JACKSONVILLE, FL 32241

**New Mailing Address:**

**FEI Number:** 20-3505413

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLUE SPHERE OBT  
12720 SOUTH ORANGE BLOSSOM TRL  
ORLANDO, FL 32837 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 #: L05000086403  
Name: BLUE SPHERE DEERFIELD PLAZA, LLC  
Address: P.O. BOX 56855  
City-St-Zip: JACKSONVILLE, FL 32241

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: T DELAHANTY

M

02/05/2012

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

\_\_\_\_\_  
Date