

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A05216

1. Entity Name
**ORLANDO TENNIS ASSOCIATES LIMITED
PARTNERSHIP**



Principal Place of Business
**545 N. PARK AVE.
C/O PRAGUE & LEVIN
WINTER PARK, FL 32789**

Mailing Address
**PO BOX 221
BROOKLYN, NY 11208-0221**

FILED

2007 APR -5 AM 9:43

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



01092007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1683099	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**DIETRICH, PAUL
STUMP, STOREY & CALLAHAN
37 N. ORANGE AVE.
ORLANDO, FL 32801**

**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 _____

**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 #	833522
NAME	B.R. Fernandez
STREET ADDRESS	ORLANDO TENNIS WORLD DEVELOPMENT CO., INC.
CITY-ST-ZIP	2689 PITKIN AVE BROOKLYN, NY 11208

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**DO NOT WRITE
IN THIS SPACE**

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

3/12/07 718 235-0714

Date

Daytime Phone #

STAPLE CHECK HERE