2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A0600000815 1. Entity Name DEVELOPMENTAL SERVICES, LTD.					FILED 07 FEB 23 AM 10: 04		
					() 5/	53 W	10: 04
Principal Place of Business Mailing Address 1095 W. MORSE BLVD. 1095 W. MORSE BLVD. WINTER PARK, FL 32789 WINTER PARK, FL 3278					SECRETART OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business - No P.O. Box # 3. Mailing Address						 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02142007 Chg-Ll	P CR2E	003 (12/06)	
City & State		City & State			4. FEI Number 20-5217851.		Applied For Not Applicable
Žip.	Country Zip C		Cour	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
NEUKAMM, MICHAEL E 301 E. PINE STREET, SUITE 1400 ORLANDO, FL 32801				Name Kenneth H. Schultz Street Address (P.O. Box Number is Not Acceptable)			
					W. Morse Blvd.	ceptable)	
				City Uinto			Zip Code
8. The above named entity submits this statement for the purpose of changing its register				, willte	er Park	FL ate of Florida Lam	32789
	tions of registered agent.	or the purpose of changing	y ito register	ed office of register	red agent, or both, in the off	ate of Florida. Talk	Tamillal Willi, and Becept
SIGNATURE O2/14/07 Signature, typod or printed name of registered agent and talle 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 PARTNE		13.			ESS CHANGES ON	
DOCUMENT # NAME	P06000076180 DEVELOPMENTAL SERVICES, INC.			EET ADORESS			. 1
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14. I hereby	certify that the information supplied w	ith this filing does not qual		ļ	ed in Chapter 119, Florida S	Statutes. I further co	ertify that the information
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 may 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							
or the red	ceiver or trustee empowered to execut	ethis report as required by	Chapter 62	20, Florida Statutes			