2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 14, 2007

SIGNATURE: SIGNATURE: SIGNATURE AND TYPES OR PRINTED NAME OF SIGNAGO CENÇUAL PARTNER

DOCUMENT # A0600000919 1. Entity Name GEORGE GONZALEZ FAMILY LIMITED PARTNERSHIP						SECRETARY OF STATE DIVISION OF CORPORATIONS 07 SEP 12 AM 11: 02				
Principal Place of Business 6655 BRYANT STREET NAVARRE, FL 32566 US Mailing Address 1900 KETTERING TOWER DAYTON, OH 45423 U			R US							
2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.			a	bore		08022007	Cha-LP	CR2E003 (12/06)	
City & State City & State		City & State	····			4. FEI Number	10000		Applied For	
Zip	Country	Zip	Zip Country			5. Certificate of	Status Desired		Not Applicable 75 Additional	
								— Fee	Required	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name Samu as #6					
GONZALEZ, GEORGE				Street And	2 (LIY	O Boy Mireshare	#6			
6655 BRYANT STREET NAVARRE, FL 32566				Street Add	ddress (P.O. Box Number is Not Acceptable)					
TAMANATAL, I E OZOOO									ľ	
				City	-			FL	Zip Code	
B. 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.								07		
SIGNATURE Spendure, typed or partied name of registered agent and title if applicable.									402(2)/b) F.S	
FILE NOW!!! FEE IS \$500.00 Due by September 14, 2007						In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.				
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.									я	
12.	13.		ADDRESS CHANGES ONLY							
DOCUMENT #	GONZALEZ, GEORGE		STR	EET ADORESS	١	616	milm. L	of Sh	Ma Da	
STREET ADDRESS	6655 BRYANT STREET NAVARRE, FL 32566			r-ST-ZIP		0 2002				
CITY-ST-ZIP					Golf Breeze Fl-32363					
DOCUMENT / NAME	D06000000018 GEORGE AND MICHELLE GONZALEZ FAMILY DYNAST			EET ADORESS	Su	me AS A Bone.				
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NAME , STREET ADDRESS			CIT	Y-ST-ZIP						
CITY-ST-ZIP	certify that the information cumuliar with	h this filling dose not qualify f	L_		oritaino	t in Chanter 110	Florida Stehden	I further certific	that the information	
14. I hereby certify that the information supplied with this filling 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										

9-5-07 (JG) 865-5513 Date Deptine Prone #