

**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

FILED

2007 MAR 29 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01242007 Chg-LP CR2E003 (12/06)

4. FEI Number 20-5538618 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DOCUMENT # A0600000988

1. Entity Name
PLANTATION GARDENS, LP

Principal Place of Business: **316 RICARDO ROAD, MILL VALLEY, CA 94941**
Mailing Address: **316 RICARDO ROAD, MILL VALLEY, CA 94941**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country



6. Name and Address of Current Registered Agent
**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	M0600004377 ST. REGIS PROPERTIES, LLC 316 RICARDO ROAD MILL VALLEY, CA 94941	STREET ADDRESS CITY-ST-ZIP	
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STAPLE CHECK HERE

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] Date 3/25/07 Daytime Phone # 415 3833906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER