

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED 1057

2007 APR 30 AM 10: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03282007 Chg-LP CR2E003 (12/06)

4. FEI Number ☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEVENSON, FREDERIC
200 S. BISCAYNE BOULEVARD, STE 4900
MIAMI, FL 33131

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 _____
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

13. ADDRESS CHANGES ONLY

DOCUMENT # L06000091271
NAME NORMANDY, LLC
STREET ADDRESS 3211 PONCE DE LEON BOULEVARD, STE 202
CITY-ST-ZIP CORAL GABLES, FL 33134

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
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STREET ADDRESS
CITY-ST-ZIP

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

Date

Daytime Phone #

Constantine
SWARTS

4-16-07 305.446.0000

STAPLE CHECK HERE