


**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 12, 2008**

<b>DOCUMENT # A06000001238</b> 1. Entity Name <b>STONEY BROOK FINANCING PARTNERSHIP, LTD.</b>	
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**FILED**  
**08 JUL 17 AM 11:22**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business <b>C/O GREENSPOON MARDER, P.A.</b> <b>201 EAST PINE STREET, SUITE 500</b> <b>ORLANDO, FL 32801</b>	Mailing Address <b>C/O GREENSPOON MARDER, P.A.</b> <b>201 EAST PINE STREET, SUITE 500</b> <b>ORLANDO, FL 32801</b>
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

07032008 Chg-LP CR2E003 (12/06)

<b>6. Name and Address of Current Registered Agent</b>  <b>GRAY, N. DWAYNE JR.</b> <b>C/O GREENSPOON MARDER, P.A.</b> <b>201 EAST PINE STREET, SUITE 500</b> <b>ORLANDO, FL 32801</b>	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City
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4. FEI Number <b>APPLIED FOR</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
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

DATE

**FILE NOW!!! FEE IS \$500.00**  
**Due by September 12, 2008**

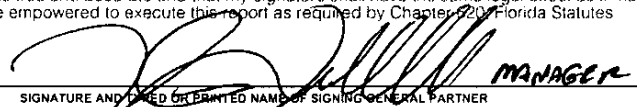
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P06000133979	STREET ADDRESS	
NAME	STONEY BROOK FINANCING GENERAL PARTNER, INC	CITY - ST - ZIP	
STREET ADDRESS	201 E. PINE STREET, SUITE 500		
CITY - ST - ZIP	ORLANDO, FL 32801		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
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STREET ADDRESS			
CITY - ST - ZIP			

000132591890  
 07/09/08--01032--001 \*\*\$500.00

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 220, Florida Statutes.	
<b>SIGNATURE:</b>  <b>MANAGER</b>	<b>7/14/08</b> <b>407-425-6559</b> <small>Date Daytime Phone #</small>

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER