

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

FILED

07 JUN 13 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A06000001450

1. Entity Name
NASCENT HEDGE FUND, L.P.



Principal Place of Business
**3300 UNIVERSITY DRIVE STE 311
CORAL SPRINGS, FL 33065**

Mailing Address
**3300 UNIVERSITY DRIVE STE 311
CORAL SPRINGS, FL 33065**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05232007 Chg-LP CR2E003 (12/06)

4. FEI Number

20-8058182

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

**LAPAT, MICHAEL
3300 UNIVERSITY DRIVE STE 311
CORAL SPRINGS, FL 33065**

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
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.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **L06000118188**
NAME **NASCENT CAPITAL MANAGEMENT, LLC**
STREET ADDRESS **3300 UNIVERSITY DRIVE STE 311**
CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

400104435014
06/15/07--01080--017 **\$500.00

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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 #

R. Terrell Reagan, MGR MBR, Nascent Capital Management, LLC
General Partner

STAPLE CHECK HERE