


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

DOCUMENT # A06113 1. Entity Name AIRPARK PLAZA, LTD.	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 JUL 18 PM 1:04

Principal Place of Business 703 WATERFORD WAY STE. 800 MIAMI, FL 33126	Mailing Address 703 WATERFORD WAY STE. 800 MIAMI, FL 33126
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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	Zip	Country



06202007 Chg-LP CR2E003 (12/06)

4. FEI Number 59-1782190	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PITTS, W. DOUGLAS 703 WATERFORD WAY STE. 800 MIAMI, FL 33126	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) _____ _____ <div style="text-align: right;">FL Zip Code</div>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	DATE _____
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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 #	M34390	STREET ADDRESS	703 waterford way Suite 800
NAME	LANCASTER DEVCORP, INC.	CITY-ST-ZIP	Miami, FL 33126
STREET ADDRESS	703 WATERFORD AVE, STE. 800		
CITY-ST-ZIP	MIAMI, FL 33126		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	100106488961
NAME		CITY-ST-ZIP	07/20/07--01032--024 **500.00
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

BLT

14. I hereby certify that the information submitted 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: _____	Date: 6/20/07 305-261-4330
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 Douglas H. Priddy, Treasurer, LANCASTER DEVCORP INC

STAPLE CHECK HERE