2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# A10141

Entity Name: FROSTPROOF VILLAS, LTD.

Current Principal Place of Business:

500 SOUTH FLORIDA AVE.,
SUITE 700
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

500 SOUTH FLORIDA AVE.,
SUITE 700
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 59-2226191 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOLAVER, MARY P
500 SOUTH FLORIDA AVE.,
SUITE 700
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

GENERAL PARTNER INFORMATION:

Document #:
Name: WOLAVER, MARY P
Address: 500 SOUTH FLORIDA AVE.,
City-St-Zip: LAKELAND, FL 33801

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MARY P WOLAVER G 03/12/2009

Electronic Signature of Signing General Partner — Date