

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Mar 27, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A20642**

1. Entity Name  
**SOUTHERNMOST BEACH MOTELS LIMITED PARTNERSHIP**



Principal Place of Business  
**121 W. LONG LAKE ROAD, THIRD FLOOR  
BLOOMFIELD HILLS, MI 48304**

Mailing Address  
**121 W. LONG LAKE ROAD, THIRD FLOOR  
BLOOMFIELD HILLS, MI 48304**



03132007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2599409**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**MATTHEW P. BABICH  
1319 DUVAL STREET  
KEY WEST, FL 33040**

**DO NOT WRITE  
IN THIS SPACE**

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**

DOCUMENT # **P38099**  
NAME **KEY WEST HOLDINGS, INC.**  
STREET ADDRESS **121 W. LONG LAKE RD. 3RD FLOOR**  
CITY-ST-ZIP **BLOOMFIELD HILLS, MI 48304**

DOCUMENT # **P06611**  
NAME **WATERFRONT MOTELS, INC.**  
STREET ADDRESS **121 W. LONG LAKE ROAD, THIRD FLOOR**  
CITY-ST-ZIP **BLOOMFIELD HILLS, MI 48304**

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000000680769  
04/04/07-80014-020 500.00

**DO NOT WRITE  
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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: *Stuart H. Kadekar*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**STUART H. KADEKAR, PRESIDENT**

**3-14-07**

Date

**248-645-1600**

Daytime Phone #

STAPLE CHECK HERE