2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

DOCUMENT #A20653

1. Entity Name

BARNACLE BAY PARTNERS LIMITED



FILED Apr 13, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

204-A ELLEN LANE

204-A ELLEN LANE

PANAMA CITY BEACH, FL 32408-5830

PANAMA CITY BEACH, FL 32408-5830



03302007 No Chg-LP

CR2E003 (12/06)

| 4. | FEI Number | | Applied For |
|----|-------------------------------|------------------|-------------------|
| | 59-2657198 | - | Not Applicable |
| 5. | Certificate of Status Desired | \$8.75 Fee Re | Additional quired |

6. Name and Address of Current Registered Agent

| WAKSTEIN, GARY 204-A ELLEN LANE PANAMA CITY BEACH, FL 32408-5830 | | DO NOT WRITE IN THIS SPACE | | |
|--|---|--|---|--|
| the obligat | named entity submits this statement for the purpose of changing i ions of registered agent. | ts registered office or registered agent, or both. | in the State of Florida. I am familiar with, and accept | |
| 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 \$9 | 00.00 | | |
| | A GENERAL PARTNER THAT IS A BUSINESS E NOTE: General Partners MAY NOT be changed on | | | |
| 12. | GENERAL PARTNER INFORMATION | | | |
| DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP | WAKSTEIN, GARY 204-A ELLEN LANE PANAMA CITY BEACH, FL 324085830 | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP | | | OT WRITE | |
| DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP | | IN THE | IIS SPACE | |
| DOCUMENT / NAME STREET ADDRESS | | | | |

14. I hereby certify that the information supplied with this indicated on this report is true and accurate and that or the receiver or trustee empowered to execute this remainder. iling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership por as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

CITY-ST-ZIP

DOCUMENT # NAME STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/24/07-80024-006 500.00