2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 21, 2008 08:00 AN Secretary of State

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1. Entity Name
MOSS PARK PROPERTIES, LLLP



Principal Place of Business

311 WEST OAK STREET KISSIMMEE, FL 34741 Mailing Address

311 WEST OAK STREET KISSIMMEE, FL 34741



DO NOT WRITE IN THIS SPACE

04182008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2654846

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

KAKKAR, SUNIL M. 311 WEST OAK STREET KISSIMMEE, FL 34741

DO NOT WRITE IN THIS SPACE

| 8. | The above named entity submits this statement for the purpose of changing its registere | ed office or registered agent, or | both, in the State of Florida. | Lam familiar with, | and accept |
|----|---|-----------------------------------|--------------------------------|--------------------|------------|
| | the obligations of registered agent. | • | | | |

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

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FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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 / NAME STREET ADDRESS CITY-ST-ZIP | KAKKAR, SUNIL 311 W. OAK ST. KISSIMMEE, FL 34741 | | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | | |
| DOCUMENT / NAME STREET ADDRESS CITY+ST-ZIP | | | |
| DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP | | | |
| DOCUMENT # NAME STREET ADDRESS CHY-ST-ZIP | | | |
| DOCUMENT # NAME STREET ADURESS | | | |

DO NOT WRITE IN THIS SPACE

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:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4(18/00)

Daylime Phone II