2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A22545

Entity Name
 OCEAN DRIVE ASSOCIATES, LTD.



Principal Place of Business

804 OCEAN DRIVE 2ND FLOOR MIAMI BEACH, FL 33139 Mailing Address

804 OCEAN DRIVE 2ND FLOOR MIAMI BEACH, FL 33139 FILED

2007 APR 17 AM 10: 02

SECRETARY OF STATE TALLAHASSEE, FLORID



01022007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 58-1727125

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MARLO COURTNEY 804 OCEAN DRIVE 2ND FLOOR MIAMI BEACH, FL 33139

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

NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT
NAME
CITY-ST-ZIP

DOCUMENT
NAME:
STREET ADDRESS
STREET ADDRESS

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.

GENERAL PARTNER INFORMATION DOCUMENT # M27414 PARK HEATHCOTE, INC. NAME STREET ADDRESS 804 OCEAN DRIVE, 2ND FLOOR CITY-ST-ZIP MIAMI BEACH, FL 33139 DOCUMENT # CORECT ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DULUMENT #

05/09/07--01005--011 **508.75

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 leport as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-4-07 305-531-441

Daytime Phone