

2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A31421

FILED
Jan 25, 2007
Secretary of State

Entity Name: OSCEOLA HEALTH CARE, LTD.

Current Principal Place of Business:

605 E ROBINSON STREET
SUITE 730
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

605 E ROBINSON STREET
SUITE 730
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-3069265 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AM&E SERVICES LLC
605 E ROBINSON STREET
SUITE 730
ORLANDO, FL 32801 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 #: S41749
Name: COMMERCE FINANCE CORP.
Address: 605 E ROBINSON STREET, SUITE 730
City-St-Zip: ORLANDO, FL 32801

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL A. SIEMER

P

01/25/2007

Electronic Signature of Signing General Partner

Date