## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

## **FILED** Due By May 1, 2007 Apr 09, 2007 08:00 A Secretary of State **DOCUMENT # A92000000023** 1. Entity Name 312 SOUTHWIND LIMITED Principal Place of Business Mailing Address 2352 FLAMINGO ROAD 2352 FLAMINGO ROAD PALM BEACH GARDENS, FL 33410 PALM BEACH GARDENS, FL 33410 04052007 No Cha-LP CR2E003 (12/06) 4. FEI Number Applied For 65-0496765 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent months of the state of the stat COX, MICHAEL A DO NOT WRITE 2352 FLAMINGO ROAD PALM BEACH GARDENS, FL 33410 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 DATE FILE NOW!!! FEE IS \$500.00 04/18/07-80002-007 500.00 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 12. DOCUMENT # COX, MICHAEL A NAME STREET ADDRESS 2352 FLAMINGO ROAD CITY -ST-ZIP PALM BEACH GARDENS, FL 33410 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP OCCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME

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 regarded by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP