2007 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# A93000001064

Entity Name: OLSEN FAMILY PARTNERSHIP, LLLP

Current Principal Place of Business:

2600 W. BLACK DIAMOND CIRCLE
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 10000
CRYSTAL RIVER, FL 34423

New Mailing Address:

PO BOX 2050
LECANTO, FL 34460

FEI Number: 59-3206751 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAYLOR, MARINA
2600 W. BLACK DIAMOND CIRCLE
LECANTO, FL 34461 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 #:
Name: OLSEN, BRUCE A
Address: PO BOX 10,000
City-St-Zip: CRYSTAL RIVER, FL 34423

ADDRESS CHANGES ONLY:

Address: PO BOX 2050
City-St-Zip: LECANTO, FL 34460

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE A. OLSEN GP 04/30/2007

Electronic Signature of Signing General Partner — Date