2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED May 01, 2007 08:00 AM Secretary of State

Due'B	y May 1, 2007	
DOCUMENT # A95000 1. Entity Name COTTON FAMILY ASSOCIATE		
Principal Place of Business 3000 HARGETT LANE SAFETY HARBOR, FL 34695	Mailing Address 3000 HARGETT LANE SAFETY HARBOR, FL 34695	
DO NOT WR	ITE IN THIS SPA	CE

04262007 No Chg-LP

CR2E003 (12/06)

4. FEI Number	····	Applied For
59-3415547		Not Applicable
5. Certificate of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COTTON, LARRY JOE 3000 HARGETT LANE SAFETY HARBOR, FL 34695		DO NOT WRITE IN THIS SPACE		
	e named entity submits this statement for the purpose of changing its regions of registered agent.	istered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept	
SIGNATURE	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 \$900.0	0		
-	A GENERAL PARTNER THAT IS A BUSINESS ENTIT NOTE: General Partners MAY NOT be changed on the			
12.	GENERAL PARTNER INFORMATION			
DOCUMENT # NAME	P94000092555 GATOR LAKE MOBILE HOME PARK INC			
STREET ADDRESS	3000 HARGETT LANE			
CITY-ST-ZIP	SAFETY HARBOR, FL 34695			
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT # NAME				
STREET ADDRESS		DO N	OT WRITE	
CITY-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IIS SPACE	
DOCUMENT #				
NAME			U00000752640	
STREET ADDRESS CITY-ST-ZIP	_		05/21/07-80024-007 500.00	
			The state of the s	
DOCUMENT # NAME	,	• •		
STREET ADDRESS		. · · · · · · · · · · · · · · · · · · ·		
CITY OF 21P				

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 his traport as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

IGNATURE AND TYPE OR ADMITED NAME OF SIGNING GENERAL PARTNER

Hawlon

137-938-2464