### 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

#### DOCUMENT # A9600000751

1. Entity Name CAE GORDON LIMITED PARTNERSHIP

Principal Place of Business

POTOMAC, MD 20854

NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

11607 SPRINGRIDGE ROAD



Mailing Address

11607 SPRINGRIDGE ROAD POTOMAC, MD 20854

# FILED May 03, 2007 08:00 AM Secretary of State



### DO NOT WRITE IN THIS SPACE

 
 03152007
 No Chg-LP
 CR2E003 (12/06)

 4. FEI Number 65-0658302
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD STE 101 TALLAHASSE, FL 32301

## 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		
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0	
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.		
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	P96000028574	`
NAME	CAE GORDON, INC.	
STREET ADDRESS	11607 SPRINGRIDGE ROAD	
CITY-ST-ZIP	POTOMAC, MD 20854	
DOCUMENT #		U00000760395
NAME		05/25/07-80009-019 500.00
STREET ADDRESS		
CITY - ST - ZIP		
DOCUMENT #		
NAME		
STREET ADDRESS	•	DO NOT WRITE
CITY-ST-ZIP		
DOCUMENT #		IN THIS SPACE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		

14. I hereby certify that the information supplied with this Hing 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 employee to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE?

4/27/07