2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOC	IME	NT	#	A	9	60	0	\mathbf{GC}	02	43	1

1. Entity Name MED PLAZA, LTD.



FILED Apr 18, 2007 08:00 A Secretary of State

Principal Place of Business

8871 FISHERMENS BAY DRIVE SARASOTA, FL 34231

Mailing Address

8871 FISHERMENS BAY DRIVE SARASOTA, FL 34231



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02262007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0717667

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GETZEN MANAGEMENT COMPANY 8871 FISHERMANS BAY DRIVE SARASOTA, FL 34231

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	ove named entity submits this statement for the purpose of changing its registered office or registered a gations of registered agent.	igent, or both, in the State of Florida. I am familiar with, and accept
SIGNATUR		DATE
	Signature, typed or printed name of registered agent and title it applicable	OAIC
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00	
	A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTER NOTE: General Partners MAY NOT be changed on the form; an amendment m	
12.	GENERAL PARTNER INFORMATION	

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	DOCUMENT # NAME STREET ADDRESS CITY- ST-ZIP	P96000084771 GETZEN MANAGEMENT COMPANY 8871 FISHERMENS BAY DRIVE SARASOTA, FL 34231					
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U00000715737 04/28/07-80002-002 500.00

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 required by Chapter 620, Florida Statutes