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

DOCUMENT # A9700000475

1. Entity Name GARDENS PARK PLAZA, LTD.



FILED Apr 23, 2007 08:00 All Secretary of State

Principal Place of Business 505 SOUTH FLAGLER DRIVE. SUITE 1010 WEST PALM BEACH, FL 33401

Mailing Address

505 SOUTH FLAGLER DRIVE, SUITE 1010 WEST PALM BEACH, FL 33401



DO NOT WRITE IN THIS SPACE

03152007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0731388

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LASSITER, WG JR. 505 SOUTH FLAGLER DRIVE, SUITE 1300 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the obligations of registered agent.	in the State of Florida. I am familiar with, and accept
SIG	GNATURE 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 \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE form; an amendment must be filed to change a general partner.

	NOTE: General Partners MAY NOT be changed on the	
12.	12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P9700017436 GARDENS PARK PLAZA, INC. 505 SOUTH FLAGLER DRIVE, SUITE 1300 WEST PALM BEACH, FL 33401	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP		

~U00000727535

DO NOT WRITE

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 thet my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership the reportes required by Chapter 620, Florida Statutes indicated on this report is true and accurate and or the receiver or trustee empowered to execute the

SIGNATURE: