



2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A97000000600 1. Entity Name SOUTH BEACH EQUITIES, LTD.	
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FILED
 07 MAY 24 AM 9:42
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 1 SLEIMAN PARKWAY, SUITE 200 270 JACKSONVILLE, FL 32216	Mailing Address 1 SLEIMAN PARKWAY, SUITE 200 270 JACKSONVILLE, FL 32216
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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03132007	Chg-LP
CR2E003 (12/06)	
4. FEI Number 59-3434389	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SLEIMAN, ELI T JR. 1 SLEIMAN PARKWAY SUITE 270 JACKSONVILLE, FL 32216	7. Name and Address of New Registered Agent Name White, Robert K. Street Address (P.O. Box Number is Not Acceptable) 1 Sleiman Parkway Suite 270 City Jacksonville FL Zip Code 32216
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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 Robert K. White Robert K. White 3/20/07
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. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.	

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT # P93000031917 NAME SOUTH BEACH EQUITIES, INC. STREET ADDRESS 1 SLEIMAN PARKWAY, SUITE 200 270 CITY-ST-ZIP JACKSONVILLE, FL 32216	STREET ADDRESS 300103638583 CITY-ST-ZIP 06/01/07--01007--009 **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

SIGNATURE: Robert K. White Robert K. White 3/20/07 904-731-8806
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE