

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A97000001139

1. Entity Name
3520 TRYON MORTGAGE HOLDINGS LTD.



Principal Place of Business
% WILLIAM SHERRY
700 S. OCEAN BLVD., SUITE 401
BOCA RATON, FL 33432 08

Mailing Address
% WILLIAM SHERRY
700 S. OCEAN BLVD., SUITE 401
BOCA RATON, FL 33432 08

DO NOT WRITE IN THIS SPACE

FILED
07 FEB 21 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01222007 No Chg-LP CR2E003 (12/06)

4. FEI Number
65-0755780

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

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

DOCUMENT # M98000001546
NAME TRYON AVENUE MORTGAGE LLC
STREET ADDRESS 1700 W 93RD TERR
CITY-ST-ZIP PLANTATION, FL 33322

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000089033120
02/22/07--01042--005 **508.75

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Michael Sherry 1/29/07 914 793-1793

STAPLE CHECK HERE