

2007 LIMITED PARTNERSHIP ANNUAL REPORT**Due By May 1, 2007****DOCUMENT # A97000001189**1. Entity Name
2630 KINGSBRIDGE MORTGAGE HOLDINGS LTD.Principal Place of Business
% WILLIAM SHERRY
700 S. OCEAN BLVD., SUITE 401
BOCA RATON, FL 33432Mailing Address
% WILLIAM SHERRY
700 S. OCEAN BLVD., SUITE 401
BOCA RATON, FL 33432**FILED**

07 FEB 21 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01222007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE4. FEI Number
65-0763825

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 # M97000000289
NAME KINGSBRIDGE MORTGAGE SERVICING LLC
STREET ADDRESS 1700 W 93RD TERR
CITY-ST-ZIP PLANTATION, FL 33322DOCUMENT #
NAME
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CITY-ST-ZIP700089033497
02/22/07--01042--011 **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