FILED **2008 LIMITED PARTNERSHIP ANNUAL REPORT** Apr 09, 2008 08:00 Al Secretary of State **Due By May 1, 2008 DOCUMENT # A97000001536** SAEF GENERATIONS, LTD. Mailing Address Principal Place of Business 1621 OAK CIRCLE SOUTH 1621 OAK CIRCLE SOUTH SARASOTA, FL 34232 SARASOTA, FL 34232 04062008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0792083 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAEF, JEROLD L DO NOT WRITE 1621 OAK CIRCLE SOUTH SARASOTA, FL 34232 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, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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. GENERAL PARTNER INFORMATION 12. DOCUMENT

NAME SAEF, JEROLD L

1621 OAK CIRCLE SOUTH

SARASOTA, FL 34232

DOCUMENT # NAME SAEF, STEVEN H STREET ADDRESS 2793 ROSEDOWN CITY-ST-ZIP MT. PLEASANT, SC 29464 DOCUMENT #

SAEF, DAVID K NAME STREET ADDRESS 4051 JORDAN LAKES DRIVE CITY-ST-ZIP MARIETTA, GA 30062

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # NAME

CITY-ST-ZIP

SAEF, LAURA R STREET ADORESS **4911 ROOSEVELT STREET**

HOLLYWOOD, FL 33021

DOCUMENT # SAEF, ELAINE L STREET ADDRESS

4911 ROOSEVELT STREET HOLLYWOOD, FL 33021

DOCUMENT # NAME STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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:

DO NOT WRITE

IN THIS SPACE