


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # A97000001539		
1. Entity Name OCOEE PROPERTIES LIMITED PARTNERSHIP		

Principal Place of Business 24725 W. 12 MILE RD. SUITE 120 SOUTHFIELD, MI 48034 US	Mailing Address 24725 W. 12 MILE RD. SUITE 120 SOUTHFIELD, MI 48034 US
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DO NOT WRITE IN THIS SPACE



04212008 No Chg-LP CR2E003 (12/06)

4. FEI Number 38-3354172	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EMO CORPORATE SERVICES, INC.
 100 N.E. THIRD AVENUE, SUITE 1100
 FT. LAUDERDALE, FL 33301

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 _____ 000000922879
Signature, typed or printed name of registered agent and title if applicable 05/15/08-2005 PAID 500.00

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.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P97000060656
NAME	OCOEE DEVELOPMENT, INC.
STREET ADDRESS	24725 W. 12 MILE RD., STE 120
CITY- ST- ZIP	SOUTHFIELD, MI 48034
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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STAPLE CHECK HERE

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] 4/22/08 248-350-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #