2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED DOCUMENT # A97000001631 1. Entity Name MILLS ASSOCIATES OF SARASOTA, LTD. 2007 APR 13 AM 10: 07 Principal Place of Business Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 786 S. ORANGE AVE. 786 S. ORANGE AVE. SARASOTA, FL 34236 SARASOTA, FL 34236 02072007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0793019 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SHOAF, MARGRET DO NOT WRITE 2100 S. TAMIAMI TRAIL, STE, 200 SARASOTA, FL 34239 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, 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. GENERAL PARTNER INFORMATION 12. P97000063529 DOCUMENT # NAME MILLS ASSOCIATES OF SOUTHWEST FLA., INC. 786 S. ORANGE AVE. STREET ADDRESS 600097229546 04/17/07--01046--002 **500.00 CITY-ST-ZIP SARASOTA, FL 34236 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP 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