2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

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FILED DOCUMENT # A97000001803 Feb 09, 2007 08:00 AM **Secretary of State** MARR 95 FAMILY, LTD. Principal Place of Business Mailing Address 560 OCEAN CAY KEY LARGO FL 33037 560 OCEAN CAY KEY LARGO FL 33037 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E003 (10/06) City & State Applied For City & State 4. FEI Number 65-0817599 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo MARR, STUART Street Address (P.O. Box Number is Not Acceptable) 560 OCEAN CAY KEY LARGO FL 33037 Zip Codo 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State. 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 ADDRESS CHANGES ONLY DOCUMENT # P97000064567 STREET LADDRESS NAME. STUART MARR, INC. STREET ADDRESS 560 OCEAN CAY CITY - ST - 7IP CHY-ST-7P KEY LARGO FL 33037 DOCUMENT # 02/19/07-80004-003 500.00 STRUCT ADDRESS NAME STREET ADDRESS CHY-ST-7IP CITY - ST-ZIP STREET ADDRESS STRUCT ADDRESS CITY - S1 - 7IP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY SI-ZIP CITY-ST-ZIP 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 eath; 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

Stuart D. Marr Phone 305-451-5516

ED OR PRINTED NAME OF SIGNING GENERAL PARTNER P. O. BOX 3130

Daytime Phone 4