

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000987

FILED
Jan 16, 2009
Secretary of State

Entity Name: GAMI OCEANFRONT LIMITED PARTNERSHIP I

Current Principal Place of Business:

C/O LITMAN GERSON LLP
500 W. CUMMINGS PARK #4900
WOBURN, MA 01801

New Principal Place of Business:

C/O LITMAN GERSON LLP ATTN. S. MUCCIO
500 W. CUMMINGS PARK #4900
WOBURN, MA 01801

Current Mailing Address:

C/O LITMAN GERSON LLP
500 W. CUMMINGS PARK #4900
WOBURN, MA 01801

New Mailing Address:

C/O LITMAN GERSON LLP ATTN. S. MUCCIO
500 W. CUMMINGS PARK #4900
WOBURN, MA 01801

FEI Number: 65-0829917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANKIN, JANE C ESQ
C/O KUBICKI DRAPER
ONE EAST BROWARD BLVD., SUITE 1600
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #: P98000042918
Name: GAMI OCEANFRONT, INC.
Address: 500 W. CUMMINGS PK #4900
City-St-Zip: WOBURN, MA 01801

ADDRESS CHANGES ONLY:

Address: 500 W. CUMMINGS PK #4900 ATTN. S MUCCIO
City-St-Zip: WOBURN, MA 01801

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GAMI OCEANFRONT, INC.

Electronic Signature of Signing General Partner

01/16/2009

Date