2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001410

Address:

City-St-Zip:

320 SILVERLODE DR.

ASPEN, CO 81611

Entity Name: SPARKS PARTNERSHIP, LTD.

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
PO BOX 3475 WEST PALM BEACH, FL 33402			505 SOUTH FLAGLER DRIVE STE 1100 WEST PALM BEACH, FL 33401	
Current Mailing Address:			New Mailing Address:	
PO BOX 34 WEST PAL	475 ₋ M BEACH, F	L 33402		
FEI Number: 65-0844039 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
505 SOUTI	STER SERV H FLAGLER I LM BEACH, F	DRIVE STE 1100		
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both
SIGNATUR	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
GENERAL PARTNER INFORMATION:			ADDRESS CHANGES ONLY:	
Document #:				
Name:		BECCA ANN TRUSTEE		
Address:		AGLER DRIVE, SUITE 1100	Address:	
City-St-Zip:	WEST PALM E	BEACH, FL 33401	City-St-Zip:	
Document #: Name:	SPARKS, REE	ECCA ANN		
Address:	315 N. 102 ST		Address:	
City-St-Zip: Document #:	NEW YORK, N		City-St-Zip:	
Name:	SPARKS, CYN	ITHIA SUSAN TRUSTEE		
Address:	505 SOUTH FI	AGLER DRIVE, SUITE 1100	Address:	
City-St-Zip:	WEST PALM E	BEACH, FL 33401	City-St-Zip:	
Document #: Name:	SPARKS, CYN	ITHIA SUSAN		

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: CYNTHIA SUSAN SPARKS GP 03/30/2007