


**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007**


**FILED  
Apr 26, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # A98000001458**  
1. Entity Name  
**AMERA FEDERAL 300, LTD.**



Principal Place of Business <b>2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065</b>	Mailing Address <b>2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065</b>
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**DO NOT WRITE IN THIS SPACE**



02162007 No Chg-LP      CR2E003 (12/06)

4. FEI Number <b>65-0856007</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**AMERA ASSOCIATES, INC.  
2900 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #	P05000041502
NAME	AMERA ASSOCIATES, INC.
STREET ADDRESS	2900 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000735710  
05/10/07-80044-016 508.75

**DO NOT WRITE  
IN THIS SPACE**

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  
**Amera Associates, Inc.**

**SIGNATURE:** \_\_\_\_\_ **George Rahael, President**      **4/15/07**      **954-753-9500**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #