
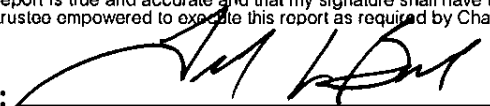


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Apr 09, 2007 08:00 A
Secretary of State

DOCUMENT # A98000002177			
1. Entity Name DUNWOODIE OF ORLANDO, LTD.			
Principal Place of Business 615 CRESCENT EXECUTIVE COURT, SUITE 1 LAKE MARY FL 32746		Mailing Address 615 CRESCENT EXECUTIVE COURT, SUITE 1 LAKE MARY FL 32746	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3537515		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRAY, N. DWAYNE JR, ESQ C/O GREENSPOON, MARDER, ET AL 201 EAST PINE STREET SUITE 500 ORLANDO FL 32801		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE	
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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P98000080107 DUNWOODIE OF ORLANDO, INC. 615 CRESCENT EXECUTIVE COURT, SUITE 120 LAKE MARY FL 32746	STREET ADDRESS CITY - ST - ZIP	U000000696734 04/18/07-80010-004 500.00
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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			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Todd L. Borck		3/27/07 (407)333-1440 Date Daytime Phone #	

STAPLE CHECK HERE