## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A98000002543

Entity Name: TIEGS & HUFF INVESTMENTS, LTD.

405 HILLCREST STREET

TALLAHASSEE, FL 32308

Address: City-St-Zip: FILED May 23, 2007 Secretary of State

| Current Principal Place of Business:                                     |  | New Principal Place of I                    | New Principal Place of Business:  |  |
|--|--|---|-----------------------------------|--|
| 5110 SE BU<br>STUART, F  | JRNING TREE CIR.<br>FL 34997   |   |                                   |  |
| Current Mailing Address:   |  | New Mailing Address:                        | New Mailing Address:              |  |
| 5110 SE BI<br>STUART, F  | JRNING TREE CIR.<br>FL 34997   |   |                                   |  |
| FEI Number:<br>In accordance   | 65-0881408 FEI Number Applied For (<br>se with s. 607.193(2)(b), F.S., the limited parti |   | Certificate of Status Desired ( ) |  |
| Name and   | Address of Current Registered Age  | nt: Name and Address of N                   | ew Registered Agent:              |  |
| TIEGS, DE<br>5110 SE BI<br>STUART, F                                     | JRNING TREE CIR.   |   |                                   |  |
| The above in the State   |  | r the purpose of changing its registered of | fice or registered agent, or both |  |
| SIGNATUR   | RE:  |   |                                   |  |
|  | Electronic Signature of Registere  | ed Agent                                    | Date                              |  |
| GENERAL PARTNER INFORMATION:   |  | ADDRESS CHANGES ONLY:                       |                                   |  |
| Document #:<br>Name:<br>Address:<br>City-St-Zip:<br>Document #:<br>Name: | TIEGS, DEL V<br>5110 SE BURNING TREE CIR.<br>STUART, FL 34997<br>HUFF, HOWARD C          | Address:<br>City-St-Zip:                    |                                   |  |

Address:

City-St-Zip:

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: DEL V. TIEGS GNPT 05/23/2007