


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

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # A99000000893</b><br>1. Entity Name<br><b>PARK CHANDON-DELRAY BEACH LIMITED PARTNERSHIP</b> |  |
|--|---|

|   |   |
|---|---|
| Principal Place of Business<br><b>16133 VENTURA BLVD., #1400<br/>ENCINO, CA 91436</b> | Mailing Address<br><b>16133 VENTURA BLVD., #1400<br/>ENCINO, CA 91436</b> |
|---|---|



03212007 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br><b>95-4746543</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75 Additional Fee Required</b> |

|  |
|--|
| 6. Name and Address of Current Registered Agent<br><br><b>NRAI SERVICES, INC.<br/>2731 EXECUTIVE PARK DRIVE<br/>SUITE 4<br/>WESTON, FL 33331</b> |
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**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 #                      | <b>L98000003194</b>               |
| NAME                            | <b>FL MSII/SEPII GP, L.C.</b>     |
| STREET ADDRESS                  | <b>16133 VENTURA BLVD., #1400</b> |
| CITY-ST-ZIP                     | <b>ENCINO, CA 91436</b>           |
| DOCUMENT #                      |                                   |
| NAME                            |                                   |
| STREET ADDRESS                  |                                   |
| CITY-ST-ZIP                     |                                   |
| DOCUMENT #                      |                                   |
| NAME                            |                                   |
| STREET ADDRESS                  |                                   |
| CITY-ST-ZIP                     |                                   |
| DOCUMENT #                      |                                   |
| NAME                            |                                   |
| STREET ADDRESS                  |                                   |
| CITY-ST-ZIP                     |                                   |
| DOCUMENT #                      |                                   |
| NAME                            |                                   |
| STREET ADDRESS                  |                                   |
| CITY-ST-ZIP                     |                                   |

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05/17/07-80002-008 500.00

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: Mark A. Porath**  **03/22/2007** **(818)385-0005**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE

Its: Authorized