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STREET ADDRESS CITY-ST-ZIP

STAPLE CHECK

CITY-ST-7/P DOCUMENT #

2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Mar 12, 2007 08:00 AM **Secretary of State**

DOCUMENT # B0100000413 1. Enlity Name PATIENCE PARTNERS, L.P.		
Principal Place of Business 2699 LEE RD SUITE 475 WINTER PARK, FL 32789	Mailing Address 2699 LEE RD SUITE 475 WINTER PARK, FL 32789	



02212007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3635090 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE TALLAHASSEE, FL 32301-2525 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. Significate hypical or primed name of registered agent and title il applicable. DATE 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. GENERAL PARTNER INFORMATION PATIENCE PARTNERS, LLC 2699 LEE RD STE 475 WINTER PARK, FL 32789 U00000664380 03/22/07-80042-014 500.100 DO NOT WRITE

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s not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information tre shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership equired by Chapter 620, Florida Statutes 14. I hereby certily that the

SIGNATURE:

IN THIS SPACE