2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED DOCUMENT # B0400000013 2007 MAY 10 PM 11: 39 FIRST CHAPEL ASSOCIATES LP Mailing Address Principal Place of Business C/O THE GOODMAN COMPANY C/O THE GOODMAN COMPANY 777 SOUTH FLAGLER DRIVE, SUITE 1101-E 777 SOUTH FLAGLER DRIVE, SUITE 1101-E WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 04252007 CR2E003 (12/06) Chg-LP 4. FEI Number 20-0551187 APPLIED FOR Applied For City & State City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE GOODMAN COMPANY Street Address (P.O. Box Number is Not Acceptable) 777 SOUTH FLAGLER DRIVE, SUITE 1101-E WEST PALM BEACH, FL 33401 Zip Code FL 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 Signature, typert or printed name of registered agent and title if 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. L03000046390 DOCUMENT # STREET ADDRESS 54 WESLEY CHAPEL LLC NAME STREET ADDRESS 777 SOUTH FLAGLER DRIVE, SUITE 1101-E CITY-ST-ZIP CITY-S1-ZIP WEST PALM BEACH, FL 33401 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF DOCUMENT ₹ STREET ADDRESS NAME STREET ADDRESS CITY ST ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS CLECK NAME STREET ADDRESS CUY SI-ZIP CITY-ST-ZIP STAPLE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 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 ic execule this report as required by Chapter (620 Florid Statuteties Inc., its manager April 27, 200**7** 561-833-3777 SIGNATURE: Date Daytime Phone

William A. Shewalter, Vice President