2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 14, 2007

		cilibei 14, 200	·		_			
1. Entity Nam FOWLER	MENT # B0400000 R, RODRIGUEZ, FLINT, GR N AND CARROLL, LLLP		07 J(FILED UN-I AM	9: 42			
400 POYDRA	e of Business AS STREET, 30TH FLOOR NS, LA 70130	Mailing Address 806 DOUGLAS ROAD SUITE 580 CORAL GABLES, FL 33134 0			ETARY OF HASSEE, F		1588) IBYBN B1 1881	
Principal Place of Business - No P.O. Box #								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			05152007	Chg-LP	CR2E003 (12	2/06)
City & Star	te	City & State			4. FEI Number 7:2-11131	70		Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of S	Status Desired		5 Additional equired
	6. Name and Address of Current Registered Agent				7. Name and Ad	dress of New R	egistered Agent	
			Name					
REGISTERED AGENT CORPORATE SERVICES INC 806 DOUGLAS ROAD, SUITE 580 CORAL GABLES, FL 33134				Street Address (P.O. Box Number is Not Acceptable) City Zip Code				
							FL Zi	
the obliga	The above named entity submits this statement for the purpose of changing its registered office or registered at the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title d applicable.						DATE	
FILE NOW!!! FEE IS \$500.00 Due by September 14, 2007 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGIST					TERED AND ACT	prior notice.	ce with s. 607.1' artnership did n	ot receive the
	NOTE: General Partners M							
12.	GENERAL PARTNI		ADDRESS CHA	NGES ONLY				
DOCUMENT #					1 17	0101	1.4000	<i>a</i> 1
NAME STREET ADDRESS CITY-ST-ZIP	FOWLER, GEORGE J III 400 POYDRAS STREET, 30TH FLOOR NEW ORLEANS, LA 70130			FET ADDRESS '-ST-ZIP			1422* 2 004 *	+ 1. ⊭* 500:00 -
DOCUMENT #	RODRIGUEZ, ANTONIO J 400 POYDRAS STREET, 30TH FLOOR			EET ADDRESS				
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I CHY-SI-ZIP			CITY	r - ST - ZIP				
DOCUMENT A NAME STREE ADDRESS				EET ADORESS		~~/		
CITY-ST-ZIP	14. I hereby certify that the information supplied with this filling does not qualify for				ed in Chapter 119. F	Florida Statutes.	I further certify the	at the information
indicated	d on this report is true and accurate an ceiver or trustee empowered to execut	d that my signature shall have	e the sam	e legal effect as if r	made under oath; th	nat I am a Gener	al Partner of the li	mited partnership
SIGNAT	TURE: SIGNATURE AND TYPED	DR PRINTED NAME OF SIGNING GENE	RAL PARTN	ER >	5,	/22/07 Date	(784) 26 Daytime P	