

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

**FILED**  
**Apr 27, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # B04000000530**

1. Entity Name  
**PASCO COGEN REALTY, L.P.**



Principal Place of Business

% PASCO PROJECT INVESTMENT PARTNERSHIP  
702 NORTH FRANKLIN STREET  
TAMPA, FL 33602

Mailing Address

% PASCO PROJECT INVESTMENT PARTNERSHIP  
702 NORTH FRANKLIN STREET  
TAMPA, FL 33602



02222007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

35-2243426

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**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

Signature, typed 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.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # A97000001234  
NAME PASCO PROJECT INVESTMENT PARTNERSHIP, LTD.  
STREET ADDRESS 702 NORTH FRANKLIN STREET  
CITY-ST-ZIP TAMPA, FL 33602

DOCUMENT # M04000003828  
NAME TETON PASCO REALTY, LLC  
STREET ADDRESS % 200 CLARENDON ST., 55TH FLOOR  
CITY-ST-ZIP BOSTON, MA 02117

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

000000738015  
05/14/07-80007-025 500.00

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:

*P. L. Barringer*

P. L. Barringer, VP-Controller

813-228-4781

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING GENERAL PARTNER

Pasco Cogen, GP, Inc. Date 4/24/07 Daytime Phone #