

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B070000000008

Entity Name: ZOM FLAGLER VILLAGE, L.P.

**FILED**  
**Apr 28, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

1950 SUMMIT PARK DRIVE, SUITE 300  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

1950 SUMMIT PARK DRIVE, SUITE 300  
ORLANDO, FL 32810

**New Mailing Address:**

FEI Number: 20-8196753

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 N. ORANGE AVENUE, SUITE 1400  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: F07000000163  
Name: ZOM FLORIDA I GP, INC.  
Address: 1950 SUMMIT PARK DRIVE, SUITE 300  
City-St-Zip: ORLANDO, FL 32810

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SAMUEL C. STEPHENS, III

EVP

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date