

DO NOT WRITE IN THIS SPACE

DOCUMENT # B9700000045

1. Entity Name

WINDSONG MOBILE VILLAGE LIMITED PARTNERSHIP



Principal Place of Business

1750 S. TELEGRAPH RD., SUITE 301A BLOOMFIELD HILLS, MI 98302 Mailing Address

1750 S. TELEGRAPH RD., SUITE 301A BLOOMFIELD HILLS, MI 98302

FILED

2007 MAR 13 AM 10: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA



02062007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0706532

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUDIN, ERIC

5720 CENTRAL AVENUE

ST. PETERSBURG: FL 99707

13577 Feather Sound Drive (#300)

Clearwater, FL

33762

Signature, typed or printed name of registered agent and title it applicable.

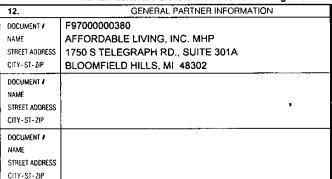
DC	NOT	WRITE
IN	THIS	SPACE

8. The above named entity submits this statement for the purpose of changing its registere	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent	
<i>Fill</i>	2/20/07

ERIG E. LUDIN, Registered Agent

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.



600094622706 03/23/07--01049--021 **500.00

DATE

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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:

DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP
COCUMENT / NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL P.

dd Rosenzweig

758-2140 Daytime Phone #