2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Apr 30, 2007 08:00 AM Secretary of State

DOCUMENT # B9700000230 1. Entity Name W FLORIDA I, L.P.				Secretary of Stat			
Principal Place 13155 NOEL SUITE 500 DALLAS, TX		Mailing Address 13155 NOEL ROAD SUITE 500 DALLAS, TX 75240					
		•, •					
	A NOT MOTE	IN THE OD		04242007 No C	Chg-LP CR	2E003 (12/06)	
L	O NOT WRITE	IN THIS SPA	ACE	4. FEI Number 22-346703	1	Applied For Not Applicable	
	,			5. Certificate of St	atus Desired 📋	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent		:			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				DO NOT WRITE IN THIS SPACE			
8. The above the obligated	named entity submits this statement for tions of registered agent.	the purpose of changing its regis	tered office or registe	red agent, or both, in	the State of Florida.	am familiar with, and accept	
	Signature, typed or printed name of registered agent a	nd title if applicable.			DA	TE	
	FILE NOW After May 1, 20	/III FEE IS \$500.00 007, Fee will be \$900.00					
	A GENERAL PARTNER TI NOTE: General Partners MA	HAT IS A BUSINESS ENTITY Y NOT be changed on the fo	' MUST BE REGIS rm; an amendme	TERED AND ACTI nt must be filed to	VE WITH THIS OF change a general	FICE. partner.	
12.	GENERAL PARTNER	INFORMATION		÷	2.1		
DOCUMENT# NAME	M97000000267			• • •		22 · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS	VV USA, LLC 13155 NOEL ROAD SUITE 500				•		
CITY-ST-ZIP	DALLAS, TX 75240			•			
DOCUMENT #							
NAME		;				·	
STREET ADDRESS					•	, <i>a</i> *	
CITY-ST-ZIP			. •			·	
DOCUMENT # NAME					• •		
STREET ADDRESS				DO NO	OT WRIT	Έ	
CITY-ST-ZIP		,					
DOCUMENT #				IN THI	S SPAC	E . •	

05/17/07-88040-007 500.00

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:

NAME STREET ADDRESS

NAME STREET ADDRESS

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Ron Ragsdale

972-715-7400

Daytime Phone #