2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

Mar 28, 2008 08:00 Al **Secretary of State DOCUMENT # A99000000435** 1. Entity Name KING'S COURT OF ORLANDO LTD. Principal Place of Business Mailing Address 20725 S.W. 46TH AVE. 20725 S.W. 46TH AVE. NEWBERRY, FL 32669 NEWBERRY, FL 32669 01212008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 62-1852728 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent DAVIS, NORITA V Street Address (P.O. BDODE NOATCE) WRITE 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669 IN THIS SPACE City 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, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 U000000873679 <u>04/10/08-80089-009 500.00</u> 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. ADDRESS CHANGES ONLY 1 --GENERAL PARTNER INFORMATION 12. 13. A95000000823 DOCUMENT # STREET ADDRESS DAVIS HERITAGE LTD. NAME STREET ADDRESS 20725 S.W. 46TH AVENUE CITY - ST-ZIP NEWBERRY, FL 32669 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP DOCUMENT # STREET ADDRESS NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS

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

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

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STREET ADDRESS

CITY-ST-7IP DOCUMENT # NAME STREET ADDRESS

CITY-ST-ZIP

Stefan M. Davis D TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

January 31, 2008

(352) 472-7773

Daytire Phone #

FILED