2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Mar 07, 2007 08:00 AM Secretary of State

Due by	may 1, 2007	V
DOCUMENT #A010000 1. Entity Name GILL PARTNERS, LTD.		
Principal Place of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·
1814 SOUTH HIGHLAND PARK DRIVE LAKE WALES, FL 33853	1814 SOUTH HIGHLAND PARK DRIVE Lake Wales, FL 33853	

ĺ	41111 11	ARIN REAL ERIN		HEIRIE ELIER
ı				
ı				

DO NOT WRITE IN THIS SPACE | 022222007 No Chg-LP

CR2E003 (12/06)

4. FEI Number		Applied For
59-3750415	 Г	Not Applicable
5. Certificate of Status Desired	 \$8.7	5 Additional

•		Fee Required	
	Name and Address of Current Registered Agent		
		DO NOT WRITE IN THIS SPACE	
the obliga	tions of registered agent.	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	DAYE	
,	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00	000000658944 03/16/07-80010-005 500.00	
12.		Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. orm; an amendment must be filed to change a general partner.	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GILL, AVIS W TRUSTEE 1814 SOUTH HIGHLAND PARK DRIVE LAKE WALES, FL 33853 GILL, AVIS W TRUSTEE 1814 SOUTH HIGHLAND PARK DRIVE LAKE WALES, FL 33853		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME			
NAME DOCUMENT			

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: A LUIS 4. Bill Jrustu

STREET ADDRESS CITY-ST-ZIP

3/05/07 (301) 661-1040

Bate Daytime Phone #