


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 19, 2007 08:00 A
Secretary of State

DOCUMENT # A04000001846

1. Entity Name
 BLAQGOLD PROPERTIES, LLLP



Principal Place of Business
 2918 COCOVIA WAY
 LEESBURG, FL 34748

Mailing Address
 2918 COCOVIA WAY
 LEESBURG, FL 34748

DO NOT WRITE IN THIS SPACE



04052007 No Chg-LP CR2E003 (12/06)

4. FEI Number 20-1976603	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDSTEIN, GERALD
 2918 COCOVIA WAY
 LEESBURG, FL 34748

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____

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

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.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P04000159752
NAME	BLAQGOLD MANAGEMENT, INC.
STREET ADDRESS	2918 COCOVIA WAY
CITY-ST-ZIP	LEESBURG, FL 34748
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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CITY-ST-ZIP	

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U00000718401
 05/01/07-80021-013 500.00

STAPLE CHECK HERE

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: GERALD GOLDSTEIN 4-5-07 352-787-9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

PRESIDENT BLAQGOLD MANAGEMENT INC.