

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

07 APR 27 AM 8:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000002483

1. Entity Name
SEMBLER HOLDINGS, LTD.



Principal Place of Business
**5858 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

Mailing Address
**P.O. BOX 41847
ST. PETERSBURG, FL 33743-1847**

BK



03022007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3432662

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SEMBLER, MELVIN F
5858 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

**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

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

DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00**

BK

**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 #
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEMBLER, MELVIN F
5858 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEMBLER, BETTY S
5858 CENTRAL AVENUE
ST. PETERSBURG, FL 33707**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Melvin F. Sembler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

MELVIN F. SEMBLER

4-26-07

Date

727-384-6000

Daytime Phone #

STAPLE CHECK HERE