

**2007 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2007**

**FILED  
Apr 25, 2007 08:00 AM  
Secretary of State**

<b>DOCUMENT # A97000000725</b> 1. Entity Name HADDEN FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business 201 SOUTH NARCISSUS, #603 WEST PALM BEACH, FL 33401	Mailing Address 201 SOUTH NARCISSUS, #603 WEST PALM BEACH, FL 33401
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**DO NOT WRITE IN THIS SPACE**



04102007 No Chg-LP	CR2E003 (12/06)
4. FEI Number 65-0740567	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>  HADDEN, WILLIAM B 201 SOUTH NARCISSUS, #603 WEST PALM BEACH, FL 33401
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**DO NOT WRITE  
IN THIS SPACE**

3. 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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**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 # NAME STREET ADDRESS CITY - ST - ZIP	HADDEN, WILLIAM B 201 S NARCISSUS AVE., APT. 603 WEST PALM BEACH, FL 33401
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	HADDEN, LOUISE APT. 603, 201 S NARCISSUS AVE. WEST PALM BEACH, FL 33401
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U00000730798  
05/08/07-80094-005 500.00

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

<b>SIGNATURE:</b> <i>William B Hadden</i> William B. Hadden	04/12/07	561-833-0065
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<small>Date</small>	<small>Daytime Phone #</small>