2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A9700001131 1. Entity Name				FILED
KIEĻÝ ASSET PARTNERS, LTD.				07 MAY 18 AM 9: 42
Principal Place of Business Mailing Address 491 SEA OAK DRIVE 491 SEA OAK DRIVE WERO BEACH, FL 32963 VERO BEACH, FL 3296				SECRETARY OF STATE FALLAHASSEE, FLORIDA
2 Principal Place of Business - No P.O. Box # 23 Mailing Address 23 Silver Moss Drive 23 Silver Moss Suite, Apt. #, etc.			s Driv	04142007 Chg-LP CR2E003 (12/06)
City & State VUO Beach Fh		City & State Vero Beach, FL		4. FEI Number Applied For 65-0742569 Nor Applicable
3296.	Zip 32963 LISA 32963 8. Name and Address of Current Registered Agent		Country USA	Certificate of Status Desired
KIELY, ELIZABETH S 491 SEA OAK DRIVE VERO BEACH, FL 32963 City				Address (P.O. Box Number is Not Acceptable) 3 Silver (1905s Drive 100 Beach FL Zip Code 32963
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 bits it 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 13.			13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS	FRASER, BETH KIELY 3095 AMBERFIED COURT		STREET ADDRESS	223 Silver Moss Drise
CITY-ST-ZIP	CHARLOTTESVILLE, VA 22911		CITY-ST-ZIP	Vero Beach, FL 32963
NAME STREET ADDRESS	RYAN, LYNN KIELY 295 SORGHUM MILL DRIVE		STREET ADDRESS CITY-ST-ZIP	223 Silver Moss Drive
DOCUMENT #	CHESHIRE, CT 06410		STREET ADDRESS	Vero Beach, FL 32963 200103612912
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DOCUMENT #			STREET ADDRESS	s
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	PR.
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: X BETTY KIELY (ELSZODETLE) 05-09-07 SIGNATURE AND DOPED ON PRINTED NAME OF STORING GENERAL PARTNER Date Date Date Date Description of				