

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

**FILED**  
**Mar 26, 2007 08:00 A**  
**Secretary of State**

|                                                                                    |                                                                                   |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # A98000002707</b><br>1. Entity Name<br>TOLSON-BYRNS PARTNERSHIP, LTD. |  |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

|                                                                                     |                                                                         |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Principal Place of Business<br>462 KINGSLEY AVE., STE. 101<br>ORANGE PARK, FL 32073 | Mailing Address<br>462 KINGSLEY AVE., STE. 101<br>ORANGE PARK, FL 32073 |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|

**DO NOT WRITE IN THIS SPACE**



01172007 No Chg-LP CR2E003 (12/06)

|                                                           |                                |
|-----------------------------------------------------------|--------------------------------|
| 4. FEI Number<br>59-3545532                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

TOLSON, JOHN F JR ESQ  
462 KINGSLEY AVE  
SUITE 101  
ORANGE PARK, FL 32073

**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.**

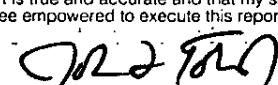
12. GENERAL PARTNER INFORMATION

|                |                                |
|----------------|--------------------------------|
| DOCUMENT #     | P98000100219                   |
| NAME           | BYRNS-TOLSON ENTERPRISES, INC. |
| STREET ADDRESS | 462 KINGSLEY AVE., STE. 101    |
| CITY-ST-ZIP    | ORANGE PARK, FL 32073          |
| DOCUMENT #     |                                |
| NAME           |                                |
| STREET ADDRESS |                                |
| CITY-ST-ZIP    |                                |
| DOCUMENT #     |                                |
| NAME           |                                |
| STREET ADDRESS |                                |
| CITY-ST-ZIP    |                                |
| DOCUMENT #     |                                |
| NAME           |                                |
| STREET ADDRESS |                                |
| CITY-ST-ZIP    |                                |
| DOCUMENT #     |                                |
| NAME           |                                |
| STREET ADDRESS |                                |
| CITY-ST-ZIP    |                                |

**DO NOT WRITE IN THIS SPACE**

U00000680504  
04/04/07-80001-009 500.00

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:**  **JOHN F. TOLSON, JR.** PRESIDENT BYRNS-TOLSON ENTERPRISES INC 3/21/07 904 269 0050

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