

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 25 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # B06000000075	
1. Entity Name 2020 VIDEO VOICE DATA LIMITED PARTNERSHIP	

Principal Place of Business 3575 LONE STAR CIR. #300 FT. WORTH, TX 76177	Mailing Address 3575 LONE STAR CIR. #300 FT. WORTH, TX 76177
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04162007	Chg-LP	CR2E003 (12/06)
4. FEI Number 20-3322761		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 NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MILLAY, BARRY 701 SUNNY HAVEN CT. HV, TX 75077	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ROWLAND, WILLIAM 701 SUNNY HAVEN CT. HV, TX 75077	STREET ADDRESS CITY-ST-ZIP	500101230375 05/02/07--01048--009 **\$500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GREEN, JASON 701 SUNNY HAVEN CT. HV, TX 75077	STREET ADDRESS CITY-ST-ZIP	
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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: Barry Millay **Barry Millay** 4-18-07 490-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE