


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007**

DOCUMENT # B06000000168	
1. Entity Name 10420 MCKINLEY PARTNERS, LP	

FILED
07 JUN 13 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business C/O THE HANOVER COMPANY 5847 SAN FELIPE, SUITE 3600 HOUSTON, TX 77057	Mailing Address C/O THE HANOVER COMPANY 5847 SAN FELIPE, SUITE 3600 HOUSTON, TX 77057
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
Country	Country

05202007	Chg-LP	CR2E003 (12/06)	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applied For
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
	FL Zip Code

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 when applicable

**FILE NOW!!! FEE IS \$900.00
On or after September 14, 2007, Fee will be \$1000.00**

**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-STATE-ZIP	M04000003560 HANOVER/METLIFE G.P. LLC 5847 SAN FELIPE, SUITE 3600 HOUSTON, TX 77057	STREET ADDRESS CITY-STATE-ZIP	400104674014 06/21/07--01048--001 **900.00
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 219 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: *Kathy K. Brinsford*

6-4-07 713.580.1193