

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

**FILED**  
**Jul 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000000069**

1. Entity Name  
**UPTON FAMILY PARTNERSHIP, LTD.**



Principal Place of Business  
**861 BALLOUGH ROAD  
DAYTONA BEACH, FL 32114-2211**

Mailing Address  
**861 BALLOUGH ROAD  
DAYTONA BEACH, FL 32114-2211**



07032007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3682070</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**KATZ, B. PAUL  
ATRIUM SUITE/B. PAUL KATZ PROFESSIONAL CTR  
1 FLORIDA PARK DRIVE SOUTH  
PALM COAST, FL 32137**

**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

Signature, typed or printed name of registered agent and title if applicable

DATE

**FILE NOW!!! FEE IS \$500.00  
Due by September 14, 2007**

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**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	<b>UPTON, HUGH D TRUSTEE</b>
STREET ADDRESS	<b>2712 SOUTH PENINSULA DRIVE</b>
CITY-ST-ZIP	<b>DAYTONA BEACH, FL 32118</b>
DOCUMENT #	
NAME	<b>UPTON, ROSEMARY TRUSTEE</b>
STREET ADDRESS	<b>2712 SOUTH PENINSULA DRIVE</b>
CITY-ST-ZIP	<b>DAYTONA BEACH, FL 32118</b>
DOCUMENT #	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

U00000770632  
07/26/07-80005-005 500.00

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**HUGH D. UPTON 7-17-07 947-9900**

Date

Daytime Phone #

STAPLE CHECK HERE