


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY SEPTEMBER 5, 2007**

FILED
Jul 25, 2007 08:00 AM
Secretary of State

DOCUMENT # A00000000436		
1. Entity Name SILVER SUN VENTURES, LTD.		

Principal Place of Business 11111 COUNTRY RIVER DRIVE PARRISH FL 34219	Mailing Address 11111 COUNTRY RIVER DRIVE PARRISH FL 34219
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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

2nd MOORE CR2E003 (4/07)

4. FEI Number 65-0993310	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GRANT, WILLIAM J JR 11111 COUNTRY RIVER DRIVE PARRISH FL 34219		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.

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00. ☐

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

File Now!!! Fee is \$900.00 • Due By September 5, 2007

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	
NAME	GRANT, WILLIAM J JR	CITY - ST - ZIP	
STREET ADDRESS	11111 COUNTRY RIVER DRIVE		
CITY - ST - ZIP	PARRISH FL 34219		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	GRANT, JOANNE Y	CITY - ST - ZIP	
STREET ADDRESS	11111 COUNTRY RIVER DRIVE		
CITY - ST - ZIP	PARRISH FL 34219		
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STREET ADDRESS			
CITY - ST - ZIP			

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07/25/07-20002-005 900.00

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: _____ **Mr. William J. Grant, Jr.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
11111 Country River Dr.
Parrish, FL 34219
941-276-2022
Daytime Phone #

STAPLE CHECK HERE

7/19/07