

**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # A00000001279					
1. Entity Name MARY P. MURPHY FAMILY PARTNERSHIP, LTD.					
Principal Place of Business 12082 S.E. PRESTWICK TERRACE JUPITER FL 33469			Mailing Address 12082 S.E. PRESTWICK TERRACE JUPITER FL 33469		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 65-1082079				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 MURPHY, MARY P 12082 S.E. PRESTWICK TERRACE JUPITER FL 33469			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.					
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	MURPHY, MARY P		CITY-ST-ZIP		
STREET ADDRESS	12082 S.E. PRESTWICK TERRACE				
CITY-ST-ZIP	JUPITER FL 33469				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	MURPHY, MARY P TRUSTEE				
STREET ADDRESS	12082 S.E. PRESTWICK TERRACE				
CITY-ST-ZIP	JUPITER FL 33469				
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STREET ADDRESS					
CITY-ST-ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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: <i>Mary P Murphy</i>			3-15-07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date		
			Daytime Phone #		



1st MOORE CR2E003 (10/06)

STAPLE CHECK HERE