2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Apr 23, 2007 08:00 A Secretary of State

| DOCUMENT # A0100000173 1. Entity Name ALBRIGHT HOLDINGS, LTD. | | | Secretary of S | | |
|---|---|---|---|--|--|
| Principal Plac 3730 ESTER FT. MYERS B | | Mailing Address 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931 | |] | |
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| DO NOT WRITE IN THIS SPAC | | | ĊF | 03302007 No Chg-L | |
| | | | - | 4. FEI Number 37-1425629 | Applied For Not Applicable |
| | | | | 5. Certificate of Status D | esired \$8.75 Additional Fee Required |
| | 6. Name and Address of Current R | egistered Agent | | | and the manager of the state of |
| ALBRIGHT, LARRY M 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931 | | | | DO NOT | |
| | | | 1. | | |
| | named entity submits this statement for tions of registered agent. | he purpose of changing its register | ed office or register | ed agent, or both, in the St | ate of Florida. I am familiar with, and accept |
| SIGNATURE Signature, typed or grinted name of registered agent and title if applicable. | | | . 100.1 | | DATE |
| | | II FEE IS \$500.00 07, 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. DOCUMENT / | GENERAL PARTNER | NFORMATION | | 4 - 4 - 4 - 4 - 4 - 4 - 4 | man to his light of the great the con- |
| NAME STREET ADDRESS CITY-ST-ZIP | ALBRIGHT, LARRY M 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931 | | | مريد المراجع ا المراجع المراجع المراج | ากก๊กกัววิวิวิเรา |
| DOCUMENT # NAME STREET ADDRESS | ALBRIGHT, MADALINE R 3730 ESTERO BLVD. | | | 05/Ŏ | 4707-80038-019 500.00 |
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| STREET ADDRESS CITY-ST-ZIP | | | | DO NOT | |
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| DOCUMENT # | I | | | 17 H | 1996年 19 |

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 employered to execute this report as required by Chapter 620, Florida Statutes
2.39 463 - 1753

SIGNATURE:

STAPLE CHECK HERE

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT /
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME O SIGNING GENERAL PARTI

LARRY M. ALBRIC.

4/16/07