


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Jan 17, 2007 08:00 AM
Secretary of State**

DOCUMENT # A01000001094 1. Entity Name E. F. JOHNS, LTD.	
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Principal Place of Business 651 NW 45TH AVE COCONUT CREEK, FL 33066	Mailing Address 651 NW 45TH AVE COCONUT CREEK, FL 33066
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DO NOT WRITE IN THIS SPACE



01062007 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-1128595	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNS, EARL F
651 NW 45TH AVE
COCONUT CREEK, FL 33066

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

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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. GENERAL PARTNER INFORMATION	
DOCUMENT #	L01000013389
NAME	JOHNS FAMILY HOLDINGS, LLC
STREET ADDRESS	651 NW 45TH AVE
CITY - ST - ZIP	COCONUT CREEK, FL 33066
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000589334
01/18/07-80012-004 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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: Earl F. Johns Date: 1/11/07 Daytime Phone #: 954-972-0448
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER