2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001182

1. Entity Name
ASHTON PARTNERS, LLLP



FILED Apr 20, 2007 08:00 AM Secretary of State

Principal Place of Business 201 S. AMELIA AVE G-4 DELAND, FL 32724 Mailing Address

201 S. AMELIA AVE G-4 DELAND, FL 32724



02272007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3735054

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Name and Address of Current Registered Agent

INGER, ROBERT A

AMELIA AVE. C. 4

GUIRLINGER, ROBERT A 201 S. AMELIA AVE., G-4 DELAND, FL 32724

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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 acce)qe
•	the obligations of registered agent.		
	U0008071:	9857	

SIGNATURE Signature, typed or printed name of registered agent and tale if applicable.

-05/01/07-80**0**81-016-508.75

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 # NAME CENTRAL MANAGEMENT COMPANY OF OHIO STREET ADDRESS 201 S. AMELIA AVE G-4 CITY-ST-ZIP DELAND, FL DOCUMENT# STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT# NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP

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14. I hereby certify that the information supplied with this filting 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:

CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-16-07

6148632727
