

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A01000001663

1. Entity Name
BJASVC LIMITED PARTNERSHIP



Principal Place of Business
2014 4TH STREET
SARASOTA, FL 34237

Mailing Address
1511 TARAVAL STREET
SUITE #205
SAN FRANCISCO, CA 94116

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#204

04032007

Chg-LP

CR2E003 (12/06)

City & State

City & State

4. FEI Number

54-2075347

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LEE, H. GREG
2014 4TH STREET
SARASOTA, FL 34237

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

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

April 3, 2007

DATE

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 # **P01000120240**
 NAME **BJASVC, INC.**
 STREET ADDRESS **1511 TARAVAL STREET #205**
 CITY-ST-ZIP **SAN FRANCISCO, CA 94116**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

400096792304
04/13/07--01039--014 **500.00

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:

Brian Connolly
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 1, 2007
 Date

415.759.1618
 Daytime Phone #

FILED

2007 APR 11 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

