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

### **DOCUMENT # A02000000048**

Entity Name
 DUVAL BBQ II, LTD.



FILED Apr 12, 2007 08:00 AM Secretary of State

Principal Place of Business 2605 SW 33RD ST #200

OCALA, FL 34474

Mailing Address

2605 SW 33RD ST #200 OCALA, FL 34474



### DO NOT WRITE IN THIS SPACE

03282007 No Chg-LP

CR2E003 (12/06)

4. FEI Number Applied For 04-3709787 Applied For Not Applicable

5. Certificate of Status Posited Posit

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

DUVAL BBQ 2, INC. 1320 S.E. 25TH LOOP, SUITE 101 OCALA, FL 34471

## 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

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

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.

Т.		note: constant artists in AT Not be changed on the
ľ	12.	GENERAL PARTNER INFORMATION
ſ	DOCUMENT #	P01000084298
ł	NAME	DUVAL BBQ 2, INC.
l	STREET ADDRESS	2605 SW 33RD ST #200
	CITY-ST-ZIP	OCALA, FL 34474
ſ	DOCUMENT #	
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000000700675 04/20/07-80026-022 500.00

# DO NOT WRITE IN THIS SPACE

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:

CITY-ST-ZIP

DOCUMENT #
NAME

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME

STREET ADDRESS
CITY-ST-ZIP

Shouth Ken Kythatrick

4/10/07 352-620-2519
Date Dayline Proces