

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 10, 2007 08:00 AM
Secretary of State

DOCUMENT # A02000000137

1. Entity Name
CAREY VI, LTD.



Principal Place of Business
**1602 COTTAGEWOOD DRIVE
BRANDON, FL 33510**

Mailing Address
**1602 COTTAGEWOOD DRIVE
BRANDON, FL 33510**



03242007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
80-0031394

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CAREY, GERTRUDE E
1602 COTTAGEWOOD DRIVE
BRANDON, FL 33510**

**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.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**CAREY, GERTRUDE E
1602 COTTAGEWOOD DRIVE
BRANDON, FL 33510**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**LEE, AMY C
1004 CHERWOOD LN.
BRANDON, FL 33511**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**CAREY, WILLIAM V
1602 COTTAGEWOOD DR.
BRANDON, FL 33501**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**RINTOUL, JILL M
17506 OSPREY MANOR WAY
LITHIA, FL 33547**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000698554

04/19/07-80006-017 500.00

**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:

Gertrude E. Carey
Gertrude E. Carey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/28/07

Date

(813)

685-1821

Daytime Phone #

STAPLE CHECK HERE