2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A02000001095

1. Entity Name

CLIPPER PROPERTIES LIMITED PARTNERSHIP



FILED Apr 27, 2007 08:00 A Secretary of State

Principal Place of Business

3343 NE 166TH STREET N. MIAMI BEACH, FL 33160 Mailing Address

3343 NE 166TH STREET N. MIAMI BEACH, FL 33160



DO NOT WRITE IN THIS SPACE

04242007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 37-1439391 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RHODES, EDWARD S 3343 NE 166TH STREET N. MIAMI BEACH, FL 33160

DO NOT WRITE IN THIS SPACE

N. MIAMI BEACH, FL 33160		IN THIS SPACE	
	named entity submits this statement for the purpose of changing its ions of registered agent.	registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE Signeture, 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 \$90	0.00	
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 #	L02000018398		
NAME	CLIPPER PROPERTIES, LLC		
STREET ADDRESS	3343 NE 166TH ST.	l l	
CITY-ST-ZIP	N. MIAMI BEACH, FL 33160		
DOCUMENT #			

DO NOT WRITE IN THIS SPACE

U00000738965 05/14/07-80004-025 500.00

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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

NAME STREET ADDRESS

CHECK HERE

WOULD A MOTHER . FOR CL. DET POSPEPTIES LLC

4-24-07

940-6518 Daytima Phone #