

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

**DOCUMENT # A02000001299**

1. Entity Name  
**GOODSON FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**12325 HWY. 672  
BALM, FL 33503**

Mailing Address  
**PO BOX 246  
BALM, FL 33503**

**DO NOT WRITE IN THIS SPACE**



04252007 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**90-0079682**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**GOODSON, JANET  
12325 HWY. 672  
BALM, FL 33503**

**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  
**GOODSON, DONN  
12325 HWY. 672  
BALM, FL 33503**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**GOODSON, JANET  
12325 HWY. 672  
BALM, FL 33503**

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

**500102723475  
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:** *Janet Goodson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**4-24-07 813685-1770**

Date

Daytime Phone #

STAPLE CHECK HERE

**FILED**

**2007 MAY 10 AM 10:25**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**