FILED
Mar 29, 2007 08:00 A
Secretary of State

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A02000001372

1. Entity Name
POPE PRODUCE, LLLP

Principal Place of Business	Mailing Address
P.O. BOX 697 PAHOKEE, FL 33476	P.O. BOX 697 PAHOKEE, FL 33476

03272007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0654585
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NOWICKI, MARK J ESQ.
480 MAPLEWOOD DRIVE, STE 2
JUPITER, FL 33458

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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 _____ DATE
Signature, type or printed name of registered agent and title if applicable.

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	POPE, EDWARD LEWIS III
STREET ADDRESS	1135 GARDEN PLACE
CITY-ST-ZIP	PAHOKEE, FL 33476
DOCUMENT #	
NAME	POPE, WALTER RUSSELL
STREET ADDRESS	2497 BACOM POINT RD.
CITY-ST-ZIP	PAHOKEE, FL 33476
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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STAPLE CHECK HERE

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: Walter K Pope 3/27/07 (561) 261-6427
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #