

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 13, 2007 08:00 A
Secretary of State

DOCUMENT # A03000000982

1. Entity Name
APOLLO BEACH INVESTMENTS LIMITED PARTNERSHIP



Principal Place of Business
7101 CAPRI LANE
PINELAND, FL 33945

Mailing Address
P.O. BOX 420
PINELAND, FL 33945



04042007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0472146

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDRESS, NOEL
7101 CAPRI LANE
PINELAND, FL 33945

**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	KRONBERG, C. JOHN
STREET ADDRESS	P.O. BOX 1407
CITY-ST-ZIP	FINDLAY, OH 45839
DOCUMENT #	A02000001559
NAME	ANDRESS FAMILY FLORIDA LP
STREET ADDRESS	P.O. BOX 420
CITY-ST-ZIP	PINELAND, FL 33945

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U000000706209
04/24/07-80024-014 500.00

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:

Noel Andress

4/4/07 (239) 283-1717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE