

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	
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Principal Place of Business 7101 CAPRI LANE PINELAND, FL 33945	Mailing Address P.O. BOX 420 PINELAND, FL 33945
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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 <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ADDRESS, 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 _____ DATE _____
Signature typed or printed name of registered agent and fee 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 STREET ADDRESS CITY-ST-ZIP	 KRONBERG, C. JOHN P.O. BOX 1407 FINDLAY, OH 45839
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	 A02000001559 ADDRESS FAMILY FLORIDA LP P.O. BOX 420 PINELAND, FL 33945
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

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U00000706209
04/24/07-80024-014 500.00

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: Noel Address 4/4/07 (239) 283-1717
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #