

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 14, 2007**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JUL 18 PM 3:05

<b>DOCUMENT # A03000001276</b> 1. Entity Name <b>HOYT BANYAN LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>133 BANYAN ROAD PALM BEACH, FL 33480</b>	Mailing Address <b>133 BANYAN ROAD PALM BEACH, FL 33480</b>
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**DO NOT WRITE IN THIS SPACE**



07052007 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>11-3708770</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**HOYT, BARRY G  
133 BANYAN ROAD  
PALM BEACH, FL 33480**

**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 title if applicable.

**FILE NOW!!! FEE IS \$900.00**  
**On or after September 14, 2007, Fee will be \$1000.00**

**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 #	<b>P03000095459</b>
NAME	<b>HOYT ENTERPRISES, INC.</b>
STREET ADDRESS	<b>133 BANYAN ROAD</b>
CITY-ST-ZIP	<b>PALM BEACH, FL 33480</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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**000106631440**  
**07/24/07--01042--004 \*\*900.00**  
**BLT**

**DO NOT WRITE IN THIS SPACE**

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:**  **7/10/07** **561-373-5860**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #