

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

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A04000000237**

1. Entity Name  
GJC PARTNERSHIP, LTD.



Principal Place of Business

5780 MIDNIGHT PASS RD, UNIT 402-B  
SARASOTA, FL 34242

Mailing Address

5780 MIDNIGHT PASS RD, UNIT 402-B  
SARASOTA, FL 34242



04242007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

20-0753635

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

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

BLALOCK, LANDERS, WALTERS & VOGLER, PA  
802 - 11TH ST WEST  
BRADENTON, FL 34205

**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 # L04000012106  
NAME GJC, LLC  
STREET ADDRESS 5780 MIDNIGHT PASS RD, UNIT 402-B  
CITY-ST-ZIP SARASOTA, FL 34242

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CITY-ST-ZIP

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000000748625  
05/17/07-80077-001-500.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone \*