2007 LIMITED PARTNERSHIP ANNUAL REPORT

FILED :00 A State

Due By May 1, 2007				Apr 23, 2007 08			
DOCUMENT # A0400000737 1. Entity Name TGR FAMILY, LTD.				Secretary of S			
Principal Place of Business 3300 PHILIPS HWY PO BOX 5369 JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32247] 			
D	O NOT WRITI	CE	03042007 No Chg-LP CR2E003 (12/06) 4. FEI Number				
	6. Name and Address of Curre	nt Registered Agent	_				
3300 PHIL	E, F. SUTTON JR IPS HWY VILLE, FL 32207	DO NOT WRITE IN THIS SPACE					
	named entity submits this statement tions of registered agent.	for the purpose of changing its regist	ered office or register	red agent, or both, in	the State of Flor	rida. I am fam	iliar with, and accept
SIGNATURE							
	Signature, typed or printed name of registered age			DATE			
		W!!! FEE IS \$500.00 2007, Fee will be \$900.00					
		THAT IS A BUSINESS ENTITY IAY NOT be changed on the for					er.
12.	GENERAL PARTN	ER INFORMATION				· ·	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT /	L04000032281 AMR FAMILY, LLC 3300 PHILIPS HWY JACKSONVILLE, FL 32207						
NAME STREET ADDRESS CITY-ST-ZIP				1	U00000 05/04/07-)727518 -80049-0)22 500.00
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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

(9 0+)

Ann M. Riley,

3 48-

SIGNATURE:

STAPLE CHECK HERE

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

348-

AMR Family.