**2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008** 

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Due By May 1, 2008					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # A0400000915				TALLAHASSEE, FLORIDA		
1. Entity Name STATE ROAD #7 PARTNERS, LTD.					08 APR 11 AM 10: 00	
					PARTITION OF	
Principal Plac		Mailing Address				
7965 LANTA LAKE WORTH		PO BOX 540669 LAKE WORTH, FL 33454	4			
		T				
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 7965 Lantana Road					) ADDIEU HIN BENN BIDAN BIRN BENN BRAN BENN BENN BENN BENN HERE WILSEN BEN BEN BENN BENN BENN BENN BENN BEN	
Suite, Apt. #, etc. Suite,		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01142008 Chg-LP CR2E003 (12/06)	
Lake Worth, FL		City & State			4. FEI Number Applied For 57-1207484 Not Applicable	
33467	Country Palm Beach	Žip	Count	ry	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent	
CHARGIEL CARV				Name Garv	Smigiel	
SMIGIEL, GARY 7965 LANTANA ROAD			ĺ	Street Address (P.O. Box Number is Not Acceptable)		
LAKE WO	RTH, FL 33454		7965 Lantana Road			
			ļ			
				Ľake	Worth <b>FL</b> 33467	
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 Spirature, typed or printed name of registered agent and title if applicable.  DATE						
FILE NOW!!! FEE IS \$500.00 04/08/0801011003 **500.00  After May 1, 2008, 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 13.				ADDRESS CHANGES ONLY		
DOCUMENT #	L93000000238		¢ ipci	ET ADDRESS T	P. O. Box 540669	
NAME	GARY SMIGIEL, L.C.		SINL	I ADDRESS I	O. BOX 340009	
STREET ADDRESS CITY-ST-ZIP	7965 LANTANA ROAD LAKE WORTH, FL 33454		CITY-	ST-ZIP I	Lake Worth, FL 33454-0669	
DOCUMENT / NAME	P03000034906 THOMAS J. MECCA, INC.		STREE	ET ADDRESS T	P. O. Box 540669	
STREET ADDRESS CITY-ST-ZIP	7965 LANTANA ROAD LAKE WORTH, FL 33454		CITY-	S1-ZIP I	ake Worth, FL 33454-0669	
DOCUMENT #			STREE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY-	S1-ZIP	Mark Mark Town	
DOCUMENT #			STREE	ET ADDRESS		
NAME STREET ADDRESS			CITY-	S1- ZIP		
CITY-ST-ZIP  DOCUMENT #			SIRF	ET ADORESS		
NAME STREET ADDRESS				SI-ZIP		
CITY-ST-ZIP  DOCUMENT #				ET ADDRESS		
NAME STREET ADDRESS				ST-ZIP		
CITY-ST-ZIP	pertify that the information supplied with	this filing does not qualify to	or the ex	emptions cont	tained in Chapter 119. Florida Statutes, I further certify that the information	
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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER