

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000915

**FILED**  
**Apr 16, 2009**  
**Secretary of State**

**Entity Name:** STATE ROAD #7 PARTNERS, LTD.

**Current Principal Place of Business:**

7965 LANTANA ROAD  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 540669  
LAKE WORTH, FL 33454

**New Mailing Address:**

**FEI Number:** 57-1207484

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMIGIEL, GARY  
7965 LANTANA ROAD  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: L93000000238  
Name: GARY SMIGIEL, L.C.  
Address: PO BOX 540669  
City-St-Zip: LAKE WORTH, FL 334540669  
Document #: P03000034906  
Name: THOMAS J. MECCA, INC.  
Address: PO BOX 540669  
City-St-Zip: LAKE WORTH, FL 334540669

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GARY SMIGIEL

RA

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date