2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

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DOCUMENT # A0400001167 1. Entity Name HERCULEAN LLLP						2007 MAY IO PM II: 38 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Plac	e of Business		Mailing Address			TAIL	$M_{\rm F}$ $M_{\rm F}$ $M_{\rm F}$	UFSTATE	
AND N NEW Y	400 N NEW YORK AVE, STE 105 PO BOX 878					IMEL	MUNDOFF	⇒FLORID∧	
	K, FL 32789		WINTER PARK, FL 32	700				,	
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			r c				10 11 0 110 110 110	#8198 88380 21881 21819 \$2411 (BB1B) B1 (881	
2. Principal P	Place of Business - No	P.O. Box #	3. Mailing Address						
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Suite, Apt.	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03282007 C	hg-LP	CR2E003 (12/06)		
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City & Stat	le .		City & State			4. FEI Number	•	Applied For	
<u>-</u>						20-1402293	3	Not Applicable	
Zip	Country	у	Zip	Cour	itry	5. Certificate of Sta	itus Desired	\$8.75 Additional	
					1		Fee Required		
	6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
	WT0.00.10.40.				Name				
KITOGRAI		F 405			Street Address (D.O. Gay Mumbasia Nat. Assess 112)				
	400 N NEW YORK AVE, STE 105				Street Address (P.O. Box Number is Not Acceptable)				
WINTERF	PARK, FL 32789								
					City			Zip Code	
,					'			FL	
8. The above the obligat	e named entity submits tions of registered ager	this statement fo at.	r the purpose of changing if	ts register	ed office or register	ed agent, or both, in t	he State of Flo	rida. I am familiar with, and accept	
SIGNATURE									
SIGNATURE	Signature, typed or printed nar	me of registered agent	and title if applicable.					DATE	
		iter May 1, 2	VIII FEE IS \$500.00 2007, Fee will be \$90					M	
	A GENERA	L PARINER I	THAT IS A BUSINESS E AY NOT be changed on	the form	IUST BE REGIST	TERED AND ACTIV	VE WITH TH	IS OFFICE.	
12.			R INFORMATION	13.			ADDRESS CHA	1 1 1 2	
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