


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Feb 08, 2007 08:00 AM
Secretary of State

DOCUMENT # A04000001248	
1. Entity Name PATE FAMILY PARTNERSHIP, LTD.	

Principal Place of Business 4521 BROOKWOOD DRIVE TAMPA FL 33629	Mailing Address 4521 BROOKWOOD DRIVE TAMPA FL 33629
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E003 (10/06)

4. FEI Number 59-2937695	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PATE, CAROLINE L 4521 BROOKWOOD DRIVE TAMPA FL 33629	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #		STREET ADDRESS	
NAME	PATE, CAROLINE L	CITY ST ZIP	000000620415 02/16/07-80013-023 500.00
STREET ADDRESS	4521 BROOKWOOD DRIVE		
CITY ST ZIP	TAMPA FL 33629		
DOCUMENT #		STREET ADDRESS	
NAME	YOUNG, CLAUDIA P	CITY ST ZIP	
STREET ADDRESS	4706 NEPTUNE STREET		
CITY ST ZIP	TAMPA FL 33629		
DOCUMENT #		STREET ADDRESS	
NAME	YOUNG, THOMAS L	CITY ST ZIP	
STREET ADDRESS	3217 W. SAN JOSE STREET		
CITY ST ZIP	TAMPA FL 33629		
DOCUMENT #		STREET ADDRESS	
NAME	YOUNG, CYNTHIA P	CITY ST ZIP	
STREET ADDRESS	1314 S. MOODY AVENUE		
CITY ST ZIP	TAMPA FL 33629		
DOCUMENT #		STREET ADDRESS	
NAME		CITY ST ZIP	
STREET ADDRESS			
CITY ST ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY ST ZIP	
STREET ADDRESS			
CITY ST ZIP			

STAPLE CHECK HERE

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: Claudia P. Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #