

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # A04000001879

1. Entity Name
TENNESSEE SQUARE PARTNERS, LTD.



Principal Place of Business
**1018 THOMASVILLE ROAD, SUITE 200-A
TALLAHASSEE, FL 32303**

Mailing Address
**1018 THOMASVILLE ROAD, SUITE 200-A
TALLAHASSEE, FL 32303**

DO NOT WRITE IN THIS SPACE



04022007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
20-1957815

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MURRAY, E. EDWARD JR
1018 THOMASVILLE ROAD, SUITE 200-A
TALLAHASSEE, FL 32303**

**DO NOT WRITE
IN THIS SPACE**

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 \$500.00
After May 1, 2007, 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

DOCUMENT # **L04000081479**
NAME **TALCOR TENNESSEE SQUARE, LLC**
STREET ADDRESS **1018 THOMASVILLE ROAD, SUITE 200-A**
CITY-ST-ZIP **TALLAHASSEE, FL 32303**

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U000000746536
05/16/07-80073-004 500.00

**DO NOT WRITE
IN THIS SPACE**

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 629, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/25/07 *850-224-2300*