2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUM	/ENT	# A04	เดดดด	01918

1. Entity Name
STRINGFELLOW PARTNERS, LLLP



Principal Place of Business

2244 ST. JOHNS AVENUE JACKSONVILLE, FL 32204

Mailing Address

2244 ST. JOHNS AVENUE JACKSONVILLE, FL 32204



DO NOT WRITE IN THIS SPACE

		DE-DI -1010 DI DI 11201 -	
03142007 No Chg-I	LP C	R2E003 (12/06)

4. FEI Number Applied For Not Applied For Not Applied Status Desired Status Desired Sand Fee Required

6. Name and Address of Current Registered Agent

ROOT, RONALD C 2244 ST. JOHNS AVENUE JACKSONVILLE, FL 32204

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of changing its regis- tions of registered agent.	ered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept			
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#	L04000087543					
NAME	DESOTO DEVELOPMENT, LLC					
STREET ADDRESS	2244 ST. JOHNS AVENUE					
CITY-ST-ZIP	JACKSONVILLE, FL 32204					
DOCUMENT #			<u> ციეტიტილეტი</u>			
NAME			U00000672981 03/29/07~80010~014 500.00			
STRLET ADDRESS CITY-ST-ZIP			03/23/0/7000107014 300.00			
DOCUMENT #						
STREET ADDRESS		DO N	OT WRITE			
CITY-ST-ZIP		DO N	OI WINIL			
DOCUMENT #		IN TH	IIS SPACE			
NAME		*** ***	IIO OI AGE			
STREET ADDRESS						
CITY-ST-ZIP		•				
DOCUMENT /						
NAME						
STREET ADDRESS						
CITY-ST-ZIP						
DOCUMENT /			•			
NAME						
STREET ADDRESS		•	•			
CITY-ST-ZIP						

14. I hereby certify that the information supplied with this fring toes not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is yet and accurate that 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 empoyered to execute this report as equired by Chapter 620, Florida Statutes