


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # A04000002053 1. Entity Name MCCLOSKEY-BILLS INDUSTRIAL PARK PARTNERSHIP, LTD.	
--	---

Principal Place of Business 3950 RCA BOULEVARD, SUITE 5000 PALM BEACH GARDENS, FL 33410	Mailing Address 3950 RCA BOULEVARD, SUITE 5000 PALM BEACH GARDENS, FL 33410
---	---



04052007 No Chg-LP CR2E003 (12/06)



4. FEI Number 59-2161144	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GARY, JOHN W III, ESQ GARY DYTRYCH & RYAN, P.A. 701 U.S. HIGHWAY ONE, SUITE 402 NORTH PALM BEACH, FL 33408
--



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.

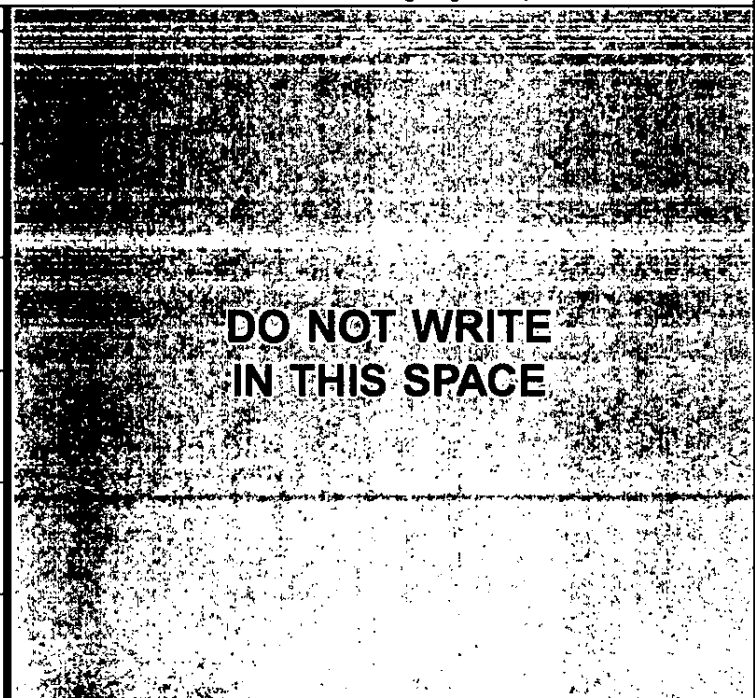
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable

U00000761670
05/25/07-00064-011 500.00
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 #	P990000095667
NAME	JCB GENERAL, INC.
STREET ADDRESS	3950 RCA BOULEVARD, SUITE 5000
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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:  John Clark Bills 4/13/7 561-627-7561
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #