

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED


2007 APR 30 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # A05000000454

1. Entity Name
BROCIOUS REALTY LIMITED



Principal Place of Business
**6430 HUNTERS ROAD
NAPLES, FL 34119 US**

Mailing Address
**6430 HUNTERS ROAD
NAPLES, FL 34119 US**

2. Principal Place of Business - No P.O. Box #
5630 Taylor Rd

3. Mailing Address
Suite, Apt. #, etc.

City & State
Naples FL

4. FEI Number
APPLIED FOR 86-131404

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**FOWLER WHITE BOGGS BANKER P.A.
5811 PELICAN BAY BOULEVARD
SUITE 600
NAPLES, FL 34108**

7. Name and Address of New Registered Agent
Name
McGowan Lucarelli & Quinn, P.A.
Street Address (P.O. Box Number is Not Acceptable)
307 Airport Pulling Rd
City
Naples FL Zip Code
34104

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 Jeffrey C. Quinn *[Signature]* DATE 3/5/07

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

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L05000021034	STREET ADDRESS	
NAME	BROCIOUS ENTERPRISES LLC	CITY-ST-ZIP	
STREET ADDRESS	6430 HUNTERS ROAD		
CITY-ST-ZIP	NAPLES, FL 34119		
DOCUMENT #		STREET ADDRESS	300102536128
NAME		CITY-ST-ZIP	05/15/07--01047--007 **500.00
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STREET ADDRESS			
CITY-ST-ZIP			

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: Scott W Brocious DATE 3/5/07 DAYTIME PHONE # 239-597-3076

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE