## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

## FILED Jan 18, 2007 08:00 AM **DOCUMENT # A05000000879 Secretary of State** 1. Entity Name FWF PARTNERS, LLLP Principal Place of Business Mailing Address 51 RIVER ROAD **51 RIVER ROAD** ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 01152007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2788301 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATSON, TODD DO NOT WRITE 7785 BAYMEADOWS WAY STE 107 JACKSONVILLE, FL 32258 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Sgratture, typed or printed name of regulatored agent and title if applicable. DATE U00000590854 01/18/07~80071-018 500.00 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 filled to change a general partner. 12. GENERAL PARTNER INFORMATION DOCUMENT # NAME GIBSON, CAROL LYNNE STREET ADORESS 51 RIVER ROAD CITY-ST-ZIP ORANGE PARK, FL 32073 DOCUMENT # NAME STREET ADDRESS CITY-ST-7/P DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT# NAME STREET ADDRESS CITY-ST-7/P DOCUMENT # STREET ADDRESS. CITY-ST-ZIP DOCUMENT# NAME

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

STREET ADORESS CITY-ST-ZIP

Carol Lynne Gibson 1-15-07 904.317-033 SIGNATURE: