2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A05000001278

1. Entity Name BAYBORO VIEW, LLLP



Principal Place of Business Mailin

24 PARADISE LANE TREASURE ISLAND, FL 33706 Mailing Address
24 PARADISE LANE
TREASURE ISLAND, FL 33706

FILED Feb 26, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

02062007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-3073170

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, JOHN E 101 E. KENNEDY BOULEVARD, SUITE 2700 TAMPA, FL 33602

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

STAPLE CHECK HERE

CITY-ST-ZIP

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 # NAME STREET ADDRESS CITY-ST-ZIP	L03000053735 BARON 18452, LLC 24 PARADISE LANE TREASURE ISLAND, FL 33706
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	TREASURE ISLAND, FL 33706
	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	

000000649521 03/07/07-80052-017 500.00

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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: DOUT TOTO OF PRINTED NAME OF SIGNING GENERAL PARTNER Date Davigne Proces