


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # A05000001594 1. Entity Name FLORIDA CAPITAL REAL ESTATE PARTNERS 25, LTD.	
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Principal Place of Business 300 INTERNATIONAL PARKWAY SUITE 300 HEATHROW, FL 32746	Mailing Address 300 INTERNATIONAL PARKWAY SUITE 300 HEATHROW, FL 32746
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-LP CR2E003 (12/06)

4. FEI Number 20-3308617	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

CHRISTY, KATHERINE A
 300 INTERNATIONAL PARKWAY
 SUITE 300
 HEATHROW, FL 32746

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 _____ DATE _____
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	
DOCUMENT #	L05000079530
NAME	FCLC 25, LLC
STREET ADDRESS	300 INTERNATIONAL PARKWAY STE 300
CITY-ST-ZIP	HEATHROW, FL 32746
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

L00000684422
 04/06/07-80032-008 500.00

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

STAPLE CHECK HERE

SIGNATURE:  DATE: 3-107 DAYTIME PHONE #: 407-333-1604

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER