


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

DOCUMENT # A05000001960		
1. Entity Name THE HOWE FAMILY LIMITED PARTNERSHIP		
Principal Place of Business 36880 WASHINGTON LOOP ROAD PUNTA GORDA FL 33982		Mailing Address 36880 WASHINGTON LOOP ROAD PUNTA GORDA FL 33982
2. Principal Place of Business - No P.O. Box # 36,880 Washington Loop Rd. Suite, Apt. #, etc.		3. Mailing Address 36,880 Washington Loop Rd. Suite, Apt. #, etc.
City & State Punta Gorda, FL Zip 33982 Country USA		City & State Punta Gorda, FL Zip 33982 Country USA

FILED
Feb 16, 2007 8:00 A.M.
Secretary of State

1st MOORE CR2E003 (10/06)

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

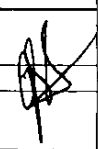
6. Name and Address of Current Registered Agent HOWE, RICHARD 36880 WASHINGTON LOOP ROAD PUNTA GORDA FL 33982		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named 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 DATE

FILE NOW!!! Fee is \$500. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #	NAME	STREET ADDRESS	
STREET ADDRESS	HOWE, ERIC	CITY-ST-ZIP	
CITY-ST-ZIP	36880 WASHINGTON LOOP ROAD PUNTA GORDA FL 33982		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
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02/20/07--01031--017 **500.00

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: Eric Howe 2/7/07 (941) 628-3562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #