


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

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

DOCUMENT # A05000002200 1. Entity Name KEEHFUS LIMITED PARTNERSHIP	
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Principal Place of Business 5055 NW 98TH WAY CORAL SPRINGS FL 33076	Mailing Address 5055 NW 98TH WAY CORAL SPRINGS FL 33076
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

1st MOORE CR2E003 (10/06)

4. FEI Number 20-2030385	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FROMKIN ENERGY, LLC 5055 NW 98TH WAY CORAL SPRINGS FL 33076	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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. * 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 #	L04000088196	STREET ADDRESS	
NAME	FROMKIN ENERGY LLC	CITY - ST - ZIP	
STREET ADDRESS	5055 NW 98TH WAY		
CITY - ST - ZIP	CORAL SPRINGS FL 33076		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	U000000647946
NAME		CITY - ST - ZIP	03/06/07-20092-021 500.00
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DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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:  **Lewis Fromkin** Per 2/18/07 954-683-2509
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **Fromkin Energy LLC** Date **2/18/07** Daytime Phone #

STAPLE CHECK HERE