

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

**FILED**  
**Apr 24, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A05266**

1. Entity Name  
**CALIFORNIA FIRST, LTD.**



Principal Place of Business  
**3945 FREEDOM CIR.  
SUITE 640  
SANTA CLARA, CA 95054**

Mailing Address  
**3945 FREEDOM CIR.  
SUITE 640  
SANTA CLARA, CA 95054**



04032007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**59-1707804**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PARACORP INCORPORATED  
236 EAST 6TH AVE.  
SUITE 204  
TALLAHASSEE, FL 32303**

**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

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 # **GP0300000311**  
NAME **MCCANDLESS PARTNERSHIP**  
STREET ADDRESS **3945 FREEDOM CIR., #640**  
CITY-ST-ZIP **SANTA CLARA, CA 95054**

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U000000728705  
05/08/07-80009-008 254.37

**DO NOT WRITE  
IN THIS SPACE**

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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:** By: **McCandless Management Corporation, its Authorized Agent**

By:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Name:

**Steven E. Sund**