

2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By September 14, 2007**

DOCUMENT # A06000000223		
1. Entity Name: G & R BATAILLE FAMILY LIMITED PARTNERSHIP		

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 SEP 12 AM 10:33

Principal Place of Business 1260 S. FEDERAL HIGHWAY BOYNTON BEACH, FL 33446	Mailing Address 1260 S. FEDERAL HIGHWAY BOYNTON BEACH, FL 33446
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



07082007 Chg-LP GR2E003 (12/06)

4. FEI Number		☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PRESLEY LAW CENTER, P.C. only PHYSICIAN LAW CENTER, LLC 3452 W. BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33436		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 _____
 Signature, name of the individual name of registered agent and title if applicable.

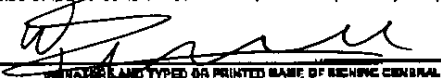
FILE NOW!!! FEE IS \$500.00
Due by September 14, 2007

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	BATAILLE, REGINE V.M.D.	STREET ADDRESS	
NAME	1260 S. FEDERAL HIGHWAY	CITY-ST-ZIP	
STREET ADDRESS	BOYNTON BEACH, FL 33446		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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 this information is 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:  **REGINE V.M.D. BATAILLE**
 Signature and typed or printed name of signing general partner

STAPLE CHECK HERE