


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

<b>DOCUMENT # A06000000470</b> 1. Entity Name ANDALUSIA CHASE, LLLP		
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**FILED**  
**Feb 16, 2007 8:00 A.M.**  
**Secretary of State**



Principal Place of Business 1815 SOUTH SUMMERLIN AVE. ORLANDO, FL 32806	Mailing Address 1815 SOUTH SUMMERLIN AVE. ORLANDO, FL 32806
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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

02132007    Chg-LP    CR2E003 (12/06)

4. FEI Number <b>74-3161768</b>	Applied For Not Applicable
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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	
HARTLEY, MARTHA A 1815 SOUTH SUMMERLIN AVE. ORLANDO, FL 32806		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 \$500.00**  
**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	HARTLEY, MARTHA A 1815 SOUTH SUMMERLIN AVE. ORLANDO, FL 32806	STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
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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 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:** Marty Hartley    2/14/07    407-420-1000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER    Date    Daytime Phone #

STAPLE CHECK HERE