


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


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 SEP 12 PM 1:23

DOCUMENT # A06000000512		
1. Entity Name D & T LIMITED PARTNERSHIP		

Principal Place of Business 1413 91ST COURT NW BRADENTON, FL 32409	Mailing Address 1413 91ST COURT NW BRADENTON, FL 32409
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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



07052007 Chg-LP CR2E003 (12/06)

4. FEI Number 20-4727233	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
CUMMINGS, DONALD B 1413 91ST COURT NW BRADENTON, FL 32409	

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 \$500.00
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 #	CUMMINGS, DONALD B	STREET ADDRESS	
NAME	1413 91ST COURT NW	CITY-ST-ZIP	
STREET ADDRESS	BRADENTON, FL 32409		
CITY-ST-ZIP			
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CITY-ST-ZIP			

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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: Donald Cummings **7-9-07** **941-792-1447**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #