


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

FILED
Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # A06965		
1. Entity Name L.P.B., LTD.		
Principal Place of Business 3340 ROOSEVELT BLVD #6 KEY WEST FL 33040		Mailing Address 3340 ROOSEVELT BLVD #6 KEY WEST FL 33040



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 59-1891088		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BREWER, LLOYD P., JR. 3340 N. ROOSEVELT BLVD., #6 KEY WEST FL 33040		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 must be filed 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 #	BREWER, LLOYD P. JR	STREET ADDRESS	
NAME	3340 N. ROOSEVELT BLVD., #6	CITY-ST-ZIP	
STREET ADDRESS	KEY WEST FL 33040		
CITY-ST-ZIP			
DOCUMENT #	BREWER, LETA P.	STREET ADDRESS	1100000644521
NAME	3340 N. ROOSEVELT BLVD., #6	CITY-ST-ZIP	03/02/07-80046-002 508.75
STREET ADDRESS	KEY WEST FL 33040		
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 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:

Leta P Brewer Gen Partner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-31-07 305-292-9929

Date

Daytime Phone #

STAPLE CHECK HERE