


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 11 PM 1:59

DOCUMENT # A07000000846		
1. Entity Name GEORGE AND DAUGHTER PARTNERS 2007-1, LLLP		

Principal Place of Business 2601 SOUTH BAYSHORE DRIVE, SUITE 725 MIAMI, FL 33133	Mailing Address 2601 SOUTH BAYSHORE DRIVE, SUITE 725 MIAMI, FL 33133
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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



01162008 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GEORGE, PHILLIP T M.D. 2601 SOUTH BAYSHORE DRIVE, SUITE 725 MIAMI, FL 33133		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, 2008, 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 #	L07000069532	STREET ADDRESS	
NAME	PT GEORGE 2, LLC	CITY-ST-ZIP	
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE, SUITE 725		
CITY-ST-ZIP	MIAMI, FL 33133		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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 04/08/08--01023--015 **500.00

14. I hereby certify that the information supplied with this filing 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 Section 620, Florida Statutes

SIGNATURE: PHILLIP T. GEORGE M.D. Date: 4-4-08
 Suite 725
 Miami, FL 33133
 Daytime Phone #: (305) 856-4242

STAPLE CHECK HERE