
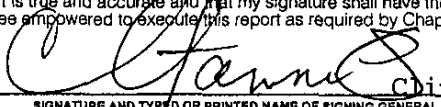


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # A11007			
1. Entity Name FANTAR, LTD.			
Principal Place of Business 7589 HIGHWAY 98 W PENSACOLA, FL 32506		Mailing Address P.O. BOX 3280 PENSACOLA, FL 32516-3280	
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
6. Name and Address of Current Registered Agent FANNING, CLIFFORD E. 7589 HIGHWAY 98 W. PENSACOLA, FL 32506		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE _____	
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 #	FANNING, CLIFFORD E.	STREET ADDRESS	U000000712832
NAME	333 S. 61ST STREET	CITY-ST-ZIP	04/26/07-80051-019 500.00
STREET ADDRESS	PENSACOLA, FL		
CITY-ST-ZIP			
DOCUMENT #	FANNING, LAURA L.	STREET ADDRESS	
NAME	333 S. 61ST STREET	CITY-ST-ZIP	
STREET ADDRESS	PENSACOLA, FL		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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NAME		CITY-ST-ZIP	
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: 		4-13-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	
Clifford E. Fanning		Daytime Phone #	
General Partner			

STAPLE CHECK HERE