

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 23 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03292007 Chg-LP CR2E003 (12/06)

4. FEI Number **59-2184188** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LINDELL FARSON & PINCHET, P.A.
12276 SAN JOSE BLVD. SUITE 126
JACKSONVILLE, FL 32223

7. Name and Address of New Registered Agent

Name LINDELL FARSON & PINCHET, P.A.
 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 _____
 Signature, typed or printed name of registered agent and title if applicable.

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

DOCUMENT # **843315**
 NAME **COMMODORES POINT TERMINAL CORP.**
 STREET ADDRESS **1010 E. ADAMS STREET**
 CITY-ST-ZIP **JACKSONVILLE, FL 32202**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

800101623138

05/04/07--01055--018 **500.00

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CAROL B. NERTLE, EXEC.V-P.

Date

Daytime Phone #

3/29/07 (904) 355-8311

STAPLE CHECK HERE