


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 FEB 14 AM 9:55

DOCUMENT # A16114 1. Entity Name DEEB INVESTMENTS, LTD.	
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Principal Place of Business 9020 RANCHO DEL RIO DRIVE, SUITE 126 NEW PORT RICHEY, FL 34655	Mailing Address 9020 RANCHO DEL RIO DRIVE, SUITE 126 NEW PORT RICHEY, FL 34655
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2. Principal Place of Business - No P.O. Box # 9400 River Crossing Blvd. Suite, Apt. #, etc. 102 City & State New Port Richey, FL Zip 34655	3. Mailing Address 9400 River Crossing Blvd Suite, Apt. #, etc. 102 City & State New Port Richey, FL Zip 34655
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01182007 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent DEEB, ALEX R. 9020 RANCHO DEL RIO DRIVE, SUITE 125 NEW PORT RICHEY, FL 34655	7. Name and Address of New Registered Agent Name Alex R. Deeb Street Address (P.O. Box Number is Not Acceptable) 9400 River Crossing Blvd. Suite 102 City New Port Richey FL Zip Code 34655
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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	13. ADDRESS CHANGES ONLY
DOCUMENT # K47763 NAME TRI COUNTY DEVELOPMENT, INC. STREET ADDRESS 9020 RANCHO DEL RIO DRIVE, SUITE 126 CITY-ST-ZIP NEW PORT RICHEY, FL 34655	STREET ADDRESS 9400 River Crossing Blvd, Suite 102 CITY-ST-ZIP New Port Richey, FL 34655
DOCUMENT #	STREET ADDRESS
NAME	CITY-ST-ZIP
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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

2/1/07

727-376-6831

Date Daytime Phone #

ALEX R. DEEB, PRESIDENT OF TRI COUNTY DEVELOPMENT, INC. ITS GEN PARTNER

STAPLE CHECK HERE