


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT #A19199 1. Entity Name LARGO/BORDEAUX ASSOCIATES, LTD.	
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Principal Place of Business 41 W-65 SERVICE ROAD, N 3RD FLOOR - COLONIAL BANK CENTRE MOBILE, AL 36608	Mailing Address P.O. BOX 160306 MOBILE, AL 36616
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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

FILED

2007 APR 30 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



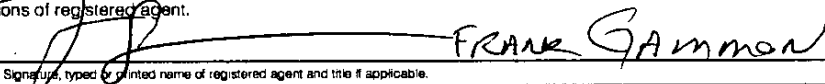
04252007 Chg-LP CR2E003 (12/06)

4. FEI Number 63-0893644	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent CAMPUS, JOSEPH J III 3298 SUMMIT BLVD #18 PENSACOLA, FL 32503-4350	7. Name and Address of New Registered Agent Name FRANK GANNON Street Address (P.O. Box Number is Not Acceptable) 301 N US HIGHWAY 27 SUITE G City CLERMONT FL Zip Code 34711
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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  **FRANK GANNON** DATE **4/25/07**

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 # NAME STREET ADDRESS CITY - ST - ZIP GP9800001084 MITCHELL EQUITIES 3298 SUMMIT BLVD #18 PENSACOLA, FL 325034350	STREET ADDRESS 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  **FRANK GANNON** DATE **4/25/07** **251-380-2329**