## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

## DOCUMENT #A19874

1. Entity Name

JETPORT INDUSTRIAL PARK OF ORLANDO, LIMITED



FILED Jan 25, 2007 08:00 A Secretary of State

Principal Place of Business
C/O GEORGE EIDSON, JR.
420 ORANGE AVE., 12TH FL 0
ORLANDO, FL 32801

Mailing Address

C/O GEORGE T. EIDSON, JR. P.O. BOX 231

ORLANDO, FL 32802-0231



## DO NOT WRITE IN THIS SPACE

01082007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2520479 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EIDSON, GEORGE T. JR. 420 ORANGE AVE., 12TH FL ORLANDO, FL 32801

## DO NOT WRITE IN THIS SPACE

|   |  | IN THIS SPACE  |
|---|--|--|
|   | named entity submits this statement for the purpose of changing its retions of registered agent. | gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept            |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE |  |  |
|   | FILE NOW!!! FEE IS \$500.00<br>After May 1, 2007, Fee will be \$900.0                            | 00   |
|   |  | TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner. |
| 12.   | GENERAL PARTNER INFORMATION  |  |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP  | EIDSON, GEORGE T., JR.<br>420 S. ORANGE AVENUE, 12TH FL<br>ORLANDO, FL 32801                     | 000000603804<br>01/23/07-80029-003 500.00  |
| DOCUMENT /<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | BISHOP, WILLIAM D., SR.<br>8 FAIROAKS LANE<br>MAITLAND, FL                                       |  |
| DOCUMENT /<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  | DO NOT WRITE   |
| DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP  |  | IN THIS SPACE  |
| DOCUMENT * NAME STREET ADDRESS CITY-ST-ZIP  |  |  |
| DOCUMENT /<br>NAME  |  | ·  |

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 649. Florida Statutes

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL ARTHE

1/23/07

Daytime Phone it