2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED
May 02, 2007 08:00 AM
Secretary of State

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1. Entity Name

STEPHEN C. O'CONNELL LAND PARTNERS, LTD.



Principal Place of Business

Ma

1351 EAST TENNESSEE STREET TALLAHASSEE, FL 32308

Mailing Address 1351 EAST TENNESSEE STREET TALLAHASSEE, FL 32308



DO NOT WRITE IN THIS SPACE

02122007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-2741420

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'CONNELL, STEPHEN C JR. 1351 EAST TENNESSEE STREET TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its registered office or regi	istered agent, or both, in the Stat	te of Florida. I an	n familiar with, and acc	ept
	the obligations of registered agent.	-			
		110	1000075633	36	

SIGNATURE

Signature, typed or printed name of registered agent and little il applicable.

<u>-05/23/07-80<u>0</u>30-003-500.00</u>

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 # NAML STREET ADDRESS CITY-ST-ZIP	O'CONNELL, STEPHEN C JR. 1351 EAST TENNESSEE STREET TALLAHASSEE, FL 32308		
_	DOCUMENT # NAME STREET ADDRESS CITY+S1-ZIP			
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			
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	DOCUMENT # NAME STREET ADDRESS CITY+ST-ZIP			
	DOCUMENT / NAME STREET ADDRESS CTY-ST-ZIP	·		

DO NOT WRITE IN THIS SPACE

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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

850 878 8780

Daie

Davime Phone