

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

**FILED**  
**Jan 25, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A23659**

1. Entity Name  
**SUNFLOWER TRAIL ESTATES, LTD.**



Principal Place of Business

ATTN: GEROGE T. EIDSON, JR.  
420 S. ORANGE AVE., 12TH FLOOR  
ORLANDO, FL 32801

Mailing Address

ATTN: GEORGE T. EIDSON JR  
PO BOX 231  
ORLANDO, FL 32802-0231



01082007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2766201**

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.  
CITRUS CENTER  
420 S. ORANGE AVE., 12TH FLOOR  
ORLANDO, FL 32802

**DO NOT WRITE  
IN THIS SPACE**

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 #

NAME  
EIDSON, GEORGE T. JR.  
STREET ADDRESS  
420 S. ORANGE AVENUE, 12TH FLOOR  
CITY-ST-ZIP  
ORLANDO, FL 32802

DOCUMENT #

NAME  
MCGOVERN, MICHAEL  
STREET ADDRESS  
65 MARYEANNA DR NE  
CITY-ST-ZIP  
ATLANTA, GA

DOCUMENT #

NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000603803  
01/29/07-80029-008 500.00

**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:

*George T. Eidson, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

1/23/07

Daytime Phone #

STAPLE CHECK HERE