2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

	1. Entity Narr	DOCUMENT # A26060 Entity Name BERNARD EGAN LTD. LLLP				FILED 07 APR -6 AMII: 59		
	Principal Place of Business Mailing Address 1900 OLD DIXIE HIGHWAY 1900 OLD DIX FT. PIERCE, FL 34946 FT. PIERCE, FL			ie highway				EE, FLORIDA
	2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
	Suite, Apt. #, etc.		Suite, Apt. #, etc.			02192007	Chg-LP CR2E	003 (12/06)
	City & State		City & State			4. FEI Number 65-00331	161	Applied For Not Applicable
	Zip	Country	Zip	Cou	ntry	5. Certificate of	Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current I		Registered Agent	tered Agent Name		7. Name and Address of New Registered Agent		
	CARNELL, RICHARD M JR. 1900 OLD DIXIE HIGHWAY FT. PIERCE, FL 34946				Street Address (P.O. Box Number is Not Acceptable)			
	•				City	· · · · · · · · · · · · · · · · · · ·	Fl	Zip Code
	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 little if applicable.				·		DATE	
	FILE NOWIII 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			n the form		t must be filed	to change a general pa ADDRESS CHANGES ON	
	DOCUMENT #	BERNARD A. EGAN LIVING TRUST			EET ADDRESS		ADDITESS CHANGES OF	<u> </u>
	STREET ADDRESS CITY-ST-ZIP	1900 OLD DIXIE HIGHWAY FT. PIERCE, FL 34946 P98000058537 EGAN CITRUS CO.			Y-ST-ZIP	45	0095944	<u>0</u> 54
	DOCUMENT / NAME				EET ADDRESS	U4/U5.1	<u> 0701006013</u>	**552,50
	STREET ADDRESS	1900 OLD DIXIE HIGHWAY FT. PIERCE, FL	CHT	r-SI-ZIP				
	DOCUMENT / NAME				EET ADDRESS			
	STREET ADDRESS CITY-ST-ZIP				r-ST-ZIP			
	DOCUMENT # NAME				STREET ADDRESS			
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	NAME STREET ADDRESS CITY-ST-ZIP				EET AODRESS /-ST-ZIP			
	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 informatindicated 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 partners or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes							ertify that the information of the limited partnership
	Egan Citrus Co. SIGNATURE: Richard M. Carnell, Jr. 2/26/07 772 489-7275							
{			R PRINTED NAME OF SIGNING GEI	NERAL PARTN	er Vice l	President	Date	Daytime Phone #