

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 13 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A29867

1. Entity Name
ICOT CENTER, LTD.



Principal Place of Business
13925 58TH ST. N.
CLEARWATER, FL 33760

Mailing Address
13925 58TH ST. N.
CLEARWATER, FL 33760



01192007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3001383

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUECK, FRED
13925 58TH ST. N.
CLEARWATER, FL 33760

**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 # V40352
NAME ICOT CENTER, INC.
STREET ADDRESS 13630 58TH STREET NORTH
CITY-ST-ZIP CLEARWATER, FL 33760

DOCUMENT # V40352
NAME ICOT CENTER INC.
STREET ADDRESS 13925 58TH ST. NORTH
CITY-ST-ZIP CLEARWATER, FL 33760

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CITY-ST-ZIP

500097293645
04/18/07--01006--008 **508.75

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/27/07

Date

727-524-4837

Daytime Phone #

STAPLE CHECK HERE