


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

**FILED**  
**May 04, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # A30807</b> 1. Entity Name <b>SAN MARCO LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>P.O. BOX 47876 JACKSONVILLE, FL 32247</b>	Mailing Address <b>P.O. BOX 47876 JACKSONVILLE, FL 32247</b>
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**DO NOT WRITE IN THIS SPACE**



04302007 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>59-3046974</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>DAVIS, T W 1910 SAN MARCO BLVD JACKSONVILLE, FL 32207</b>
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**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.

U000000761779  
05/25/07-80068-018 500.00  
DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, Fee will be \$900.00**

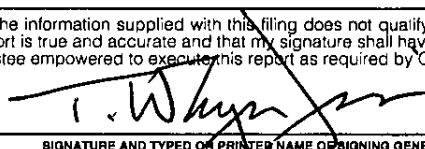
**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	S09664 REDWING LAND COMPANY 2002 SAN MARCO BLVD., SUITE 204 JACKSONVILLE, FL 32207
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**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

4/30/07

Date

Daytime Phone #

STAPLE CHECK HERE