

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT #A31065

1. Entity Name
JENNEWEIN ENTERPRISES, LTD.



Principal Place of Business
**4710 CLEAR AVENUE
TAMPA, FL 33629**

Mailing Address
**4710 CLEAR AVENUE
TAMPA, FL 33629**

DO NOT WRITE IN THIS SPACE



01042007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-3045595

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JENNEWEIN, JAMES J.
4710 CLEAR AVENUE
TAMPA, FL 33629**

**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	JENNEWEIN, JAMES J.
STREET ADDRESS	4710 CLEAR AVENUE
CITY-ST-ZIP	TAMPA, FL
DOCUMENT #	
NAME	JENNEWEIN, JOAN W.
STREET ADDRESS	4710 CLEAR AVENUE
CITY-ST-ZIP	TAMPA, FL
DOCUMENT #	
NAME	JENNEWEIN, JONATHAN P
STREET ADDRESS	101 E KENNEDY BLVD STE 3700
CITY-ST-ZIP	TAMPA, FL 33602

U00000673077
03/29/07-80015-007 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-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 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

Date

Daytime Phone #

JAMES J. JENNEWEIN 3/18/07 8132860744