

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 30 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A93000001104

1. Entity Name
ATKINS STORAGE & OFFICE CENTER, LTD.



Principal Place of Business

Mailing Address

Atkins Storage & Office Center
3417 SW 42nd Way
Gainesville, FL 32608

~~3401 SW 40 BLVD., SUITE 150~~
GAINESVILLE, FL 32608

CHANGE OF ADDRESS



DO NOT WRITE IN THIS SPACE

03152007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-3207767

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ATKINS, ROBERT M Atkins Storage & Office Center
~~3401 SW 40 BLVD.~~ 3417 SW 42nd Way
GAINESVILLE, FL 32608 Gainesville, FL 32608

**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	STREET ADDRESS	CITY-ST-ZIP
	ATKINS, ROBERT M	3401 SW 40 BLVD., SUITE 150	3417 SW 42nd Way GAINESVILLE, FL 32608
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
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05/02/07--01052--016 **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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/20/07 352-377-3033

STAPLE CHECK HERE