

2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

DOCUMENT # A94000000746

1. Entity Name

SWIN PARTNERS, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 FEB -7 AM 10:16

Principal Place of Business

Mailing Address

333 SOUTHERN BLVD., SUITE 306
WEST PALM BEACH FL 33405

333 SOUTHERN BLVD., SUITE 306
WEST PALM BEACH FL 33405

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0493883

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWINDLE, CHRISTOPHER K
2916 WASHINGTON ROAD
WEST PALM BEACH FL 33405

Name SWINDLE, CHRISTOPHER K.

Street Address (P.O. Box Number is Not Acceptable)

7608 S. FLAGLER DRIVE

City

West Palm Beach

FL

Zip Code

33405

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. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P93000068528
NAME SWIN PETROLEUM COMPANY
STREET ADDRESS 7608 S FLAGLER DRIVE
CITY - ST - ZIP WEST PALM BEACH FL 33405

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
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STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

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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:

Christopher K Swindle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

January 29, 2007 (561) 802-9944
Date Daytime Phone #

STAPLE CHECK HERE