

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000001342

**FILED**  
**Feb 15, 2007**  
**Secretary of State**

**Entity Name:** THE ELFERS FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

18704 MACH ONE DRIVE  
PORT ST. LUCIE, FL 34987

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MR. FREDRICK J.H. ELFERS  
18704 MACH ONE DRIVE  
PORT ST. LUCIE, FL 34987

**New Mailing Address:**

**FEI Number:** 65-0522762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES FOSTER SERVICE, LLC  
JONES FOSTER JOHNSTON & STUBBS, P.A.  
505 S. FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

JONES FOSTER SERVICE, LLC  
505 S. FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH, FL 33401 US

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.

SIGNATURE:

02/15/2007

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: L05000001457  
Name: ELFERS ENTERPRISES HOLDINGS, LLC  
Address: 18704 MACH ONE DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34987

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FREDRICK ELFERS

MGR

02/15/2007

Electronic Signature of Signing General Partner

Date