


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

**FILED  
Feb 15, 2007 08:00 A  
Secretary of State**

<b>DOCUMENT # A94000001440</b> 1. Entity Name <b>GRIFFIN FAMILY LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>425 N. LAKE REEDY BLVD. FROSTPROOF, FL 33843</b>	Mailing Address <b>P.O. BOX 128 FROSTPROOF, FL 33843</b>
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**DO NOT WRITE IN THIS SPACE**



02082007 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>59-3274620</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MYERS, CORNEAL B  
130 E. CENTRAL AVENUE  
LAKE WALES, FL 33853**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable

**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	<b>GRIFFIN, BEN H III</b>
STREET ADDRESS	<b>425 NORTH LAKE REEDY BLVD.</b>
CITY-ST-ZIP	<b>FROSTPROOF, FL 33843</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
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IN THIS SPACE**

U00000637765  
02/26/07-80074-021 500.00

U00000637765  
02/26/07-80074-020 8.75

STAPLE CHECK HERE

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: B H Griffin Feb. 13, 2007 863-676-7611  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #