

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 25 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A94000001671

1. Entity Name
CALLAWAY LAND & CATTLE CO. LIMITED PARTNERSHIP



Principal Place of Business
**30395 N.W. 72ND AVE.
OKEECHOBEE, FL 34972**

Mailing Address
**30395 N.W. 72ND AVE.
OKEECHOBEE, FL 34972**



DO NOT WRITE IN THIS SPACE

02142007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3281214	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~FEE, FRANK H III
401 A S INDIAN RIVER DR
FORT PIERCE, FL 34950~~

**John Holcomb JR
30395 NW 72nd Ave
Okeechobee, FL 34972**

**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

100101615441
05/24/07 01:47:001 **508.75

**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 #	665938
NAME	CALLAWAY LAND & CATTLE CO., INC.
STREET ADDRESS	30395 N.W. 72ND AVE.
CITY-ST-ZIP	OKEECHOBEE, FL 34972

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**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/11/07 863-467-6565

STAPLE CHECK HERE