

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000000863

**FILED**  
**Feb 08, 2007**  
**Secretary of State**

**Entity Name:** SCANLON FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4805 GRIFFIN BOULEVARD  
FORT MYERS, FL

**New Principal Place of Business:**

**Current Mailing Address:**

4805 GRIFFIN BOULEVARD  
FORT MYERS, FL

**New Mailing Address:**

**FEI Number:** 65-0539788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCANLON, JOHN E  
4805 GRIFFIN BOULEVARD  
FORT MYERS, FL US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: SCANLON, JOHN E  
Address: 4805 GRIFFIN BOULEVARD  
City-St-Zip: FT MYERS, FL

Document #:

Name: SCANLON, JOAN  
Address: 4805 GRIFFIN BOULEVARD  
City-St-Zip: FT MYERS, FL

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: JOHN E SCANLON

MR

02/08/2007

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date