
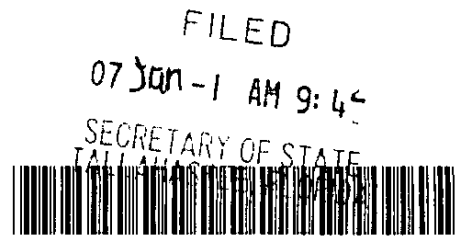


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2007**

<b>DOCUMENT # A95000001089</b> 1. Entity Name <b>TIBBETTS FAMILY LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>3300 FAIRFIELD AVENUE SOUTH ST. PETERSBURG FL 33712</b>				Mailing Address <b>3300 FAIRFIELD AVENUE SOUTH ST. PETERSBURG FL 33712</b>	
2. Principal Place of Business - No P.O. Box # <b>695 31<sup>ST</sup> STREET SOUTH</b>		3. Mailing Address <b>695 31<sup>ST</sup> STREET SOUTH</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>ST. PETERSBURG, FL</b>		City & State <b>ST. PETERSBURG, FL</b>		4. FEI Number <b>59-3327895</b>	
Zip <b>33712</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>RUSSEL, BRANDES P 695 31<sup>ST</sup> SOUTH ST. PETERSBURG FL 33712</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 <u><i>Russel P. Brandes</i></u> <i>Reg Agent</i> DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY ST-ZIP <b>TIBBETTS, LINTON N TRUSTEE 3300 FAIRFIELD AVENUE SOUTH ST. PETERSBURG FL 33712</b>			STREET ADDRESS <b>695 31<sup>ST</sup> STREET SOUTH</b> CITY ST-ZIP <b>ST. PETERSBURG, FL 33712</b>		
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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: <u><i>Linton N. Tibbets</i></u> <b>LINTON N. TIBBETTS</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					



1st MOORE CR2E003 (10/06)

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