2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Apr 26, 2007 08:00 AM Secretary of State

DOCUMENT # A95000001432

1. Entity Name CB TANK FARM, LTD.



Principal Place of Business

1200 DUDA TRAIL OVIEDO, FL 32765 Mailing Address

P.O. BOX 620257 OVIEDO, FL 32762-0257



DO NOT WRITE IN THIS SPACE

nalik perilengak kali serin 1954, mendili 1974, mendili 1974, mendili 1974, mendili 1974, mendili 1974, mendil Perilengah kalik perilengah kalik perilengah perilengah perilengah perilengah perilengah perilengah perilengah 04192007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3341975

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHAPMAN, TRACY DUDA 1200 DUDA TRAIL OVIEDO, FL 32765 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

6. Name and Address of Current Registered Agent

DATE

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 STREET ADDRESS CITY-ST-ZIP	583341 DUDA PRODUCTS, INC. 1200 DUDA TRAIL OVIEDO, FL 32765	000000736158
DOCUMENT # NAME STREET ADDRESS C/1Y-S1-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS CITY- ST-ZIP		IN THIS SPACE
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP		
DOCUMENT # NAME STREET ADDRESS		

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:

STAPLE CHECK HERE

SIGNATURE AND TYPED OF PRINTED NAME OF BIGNING GENERAL PARTNER

04/19/07 407-365-2111

Daytime Phone

David J. Duda