

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

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # A95000001639	
1. Entity Name VAN PELT FAMILY LIMITED PARTNERSHIP	

Principal Place of Business 9410 HIGHWAY 97 CENTURY FL 32535	Mailing Address 9410 HIGHWAY 97 CENTURY FL 32535
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E003 (10/06)

4. FEI Number 59-3363491	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VAN PELT, JAMES G 9410 HIGHWAY 97 CENTURY FL 32535	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 James G Van Pelt DATE _____

FILE NOW!!! Fee is \$500. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	VANPELT, JAMES G	STREET ADDRESS	
NAME	9410 HIGHWAY 97	CITY- ST- ZIP	
STREET ADDRESS	CENTURY FL 32535		
CITY- ST- ZIP			
DOCUMENT #	VANPELT, GEORGE T	STREET ADDRESS	U000000727292
NAME	9410 HIGHWAY 97	CITY- ST- ZIP	05/04/07-80041-019 500.00
STREET ADDRESS	CENTURY FL 32535		
CITY- ST- ZIP			
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STREET ADDRESS			
CITY- ST- ZIP			

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: James G Van Pelt **17 Apr 2007** **1-850 327 4121**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE