


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # A95000001643 1. Entity Name VAULT - OLD KINGS PARTNERS, LTD.	
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Principal Place of Business 7220 FINANCIAL WAY SUITE 400 JACKSONVILLE, FL 32256	Mailing Address 7220 FINANCIAL WAY SUITE 400 JACKSONVILLE, FL 32256
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04092007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3352194	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, JOHN J
7220 FINANCIAL WAY
SUITE 400
JACKSONVILLE, FL 32256

**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

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 #	V73143
NAME	THE VAULT GROUP, INC.
STREET ADDRESS	7220 FINANCIAL WAY
CITY-ST-ZIP	JACKSONVILLE, FL 32256
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

000000711015
04/25/07-80066-011 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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:

John J. Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/2/07
Date

904 246 8004
Daytime Phone #