2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A95000001706

 Entity Name MELROSE LANDING, LTD.



FILED Jan 29, 2007 08:00 AM Secretary of State

Principal Place of Business

4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606

Mailing Address

P.O. BOX 357845 GAINESVILLE, FL 32635



DO NOT WRITE IN THIS SPACE

01102007 No Chg-LP

CR2E003 (12/06)

FEI Number
 59-2322036

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

LEE, DENNIS G 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606

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	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 to the obligations of registered agent.	amiliar with, and	I accept
C.	CNATION		

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.

	NOTE: General Partners MAY NOT be changed on the			
	12.	GENERAL PARTNER INFORMATION		
	DOCUMENT #	G56910		
	NAME	FLORIDA WOODLAND, INC.		
	STREET ADDRESS	4127 NW 27TH LN., SUITE A		
	CITY-SI-ZIP	GAINESVILLE, FL 32606		
	DOCUMENT #	L95000000298		
	NAME	JEAN PROPERTIES, L.C.		
	STREET ADDRESS	4127 NW 27TH LN., SUITE A		
	City-St-ZIP	GAINESVILLE, FL 32606		
	DOCUMENT #	481672		
	NAME	SOUTHERN PROPERTIES, INC.		
	STREET ADDRESS	4127 NW 27TH LN., SUITE A		
	CITY-ST-ZIP	GAINESVILLE, FL 32606		
	DOCUMENT #			
	NAME			
	STREET ADDRESS			
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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:

CITY-ST-ZIP

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL

Donnis LLee

1-16-07

352-234-1976

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Daytima Phone #