

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

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

DOCUMENT # A95000001718

1. Entity Name
J & J MOXON PARTNERSHIP, LTD.



Principal Place of Business
**377 N.W. 14TH STREET
OCALA, FL 34475**

Mailing Address
**P.O. BOX 1389
OCALA, FL 34478**



03132007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3355225

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MOXON, HENRY J
377 N.W. 14TH STREET
OCALA, FL 34475**

**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 # **234381**
NAME **G & M CATTLE COMPANY**
STREET ADDRESS **377 N.W. 14TH STREET**
CITY-ST-ZIP **OCALA, FL 34475**

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11000000670412
03/27/07-80111-001 500.00

**DO NOT WRITE
IN THIS SPACE**

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.

G & M CATTLE COMPANY, GENERAL PARTNER
SIGNATURE: P.J. Henry J. J. Moxon HENRY J.G. MOXON, PRES. 3/14/07 352/732-2324
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE