


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

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

DOCUMENT # A960000000083	
1. Entity Name SHILOH FAMILY, LTD.	

Principal Place of Business 5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023	Mailing Address 5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023
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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	Zip	Country

1st MOORE CR2E003 (10/06)

4. FEI Number 65-0625504		<input type="checkbox"/> 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		7. Name and Address of New Registered Agent	
COHN, ALAN B C/O ABRAMS, ANTON, ROBBINS, RESNICK 2021 TYLER ST. HOLLYWOOD FL 33022		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 _____ **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

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 #	NAME	STREET ADDRESS	
STREET ADDRESS	STANTON, RICHARD	CITY - ST - ZIP	
CITY - ST - ZIP	5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	STANTON, LINDA	CITY - ST - ZIP	
CITY - ST - ZIP	5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023		
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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: RICHARD STANTON *Richard Stanton* **4/20/07** **954-966-8430**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE