

FILED
May 01, 2007 08:00 AM
Secretary of State

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A96000000092

1. Entity Name
THE FRANCES R. FORD FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**513 N. RIVERSIDE DRIVE
EDGEWATER, FL 32132**

Mailing Address
**P.O. BOX 425
NEW SMYRNA BEACH, FL 32170**



04202007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3352702

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FORD, FRANCES R
513 N. RIVERSIDE DRIVE
EDGEWATER, FL 32132**

**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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**FORD, FRANCES R TRUSTEE
513 N. RIVERSIDE DRIVE
EDGEWATER, FL 32132**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**FORD, FRANCES R
513 N. RIVERSIDE DRIVE
EDGEWATER, FL 32132**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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05/21/07-80024-004 500.00

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

Frances R. Ford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-23-07

DATE

3864289702

Daytime Phone #

STAPLE CHECK HERE