## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

## DOCUMENT # A96000000195

1. Entity Name
KATANA LIMITED PARTNERSHIP

Mailing Address

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



Mailing Address
P.O. BOX 353730
PALM COAST, FL 32135



DO NOT WRITE IN THIS SPACE

01022007 No Chg-LP CR2E

CR2E003 (12/06)

4. FEI Number 59-3361781

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ECKER, EDWARD 193 MONITOR DR FLAGLER BEACH, FL 32136

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<ol> <li>The above named entity submits this statement for the purpose of changing its registered office or register the obligations of registered agent.</li> </ol>	ed agent, or both, in the State of Florida. I am familiar with, and accept
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.

		NOTE: General Partners MAY NOT be changed on the		
	12.	GENERAL PARTNER INFORMATION		
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	ECKER, EDWARD P.O. BOX 353730 N/A PALM COAST, FL 32135		
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	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

DOCUMENT # NAME

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # NAME

STREET ADDRESS
CITY-ST-ZIP

Edward Ecker

EDWARD ECKER

12/07 386 439 2776