


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # A9600000769 1. Entity Name PROFESSIONAL MANAGEMENT CONCEPTS, LTD.	
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Principal Place of Business 3101 13TH ST ST. CLOUD, FL 34769	Mailing Address 3101 13TH ST F ST. CLOUD, FL 34769
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03212007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3373790	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$6.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MURRAY, FRANK J 4530 ALBRITTON ROAD ST. CLOUD, FL 34772

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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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	MURRAY, FRANK J 4530 ALBRITTON ROAD ST. CLOUD, FL 34772
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STAPLE CHECK HERE

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: <i>Frank J. Murray</i>	Date: <i>4-23-07</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<small>Date Daytime Phone #</small>