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

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # A96000001094**

1. Entity Name I.B.K., LTD.



FILED May 03, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

**515 WEST BRYAN STREET** KISSIMMEE, FL 34741

Mailing Address

P.O. BOX 422312

KISSIMMEE, FL 34742-2312



04282007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3387798

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEE, GARY L 515 W. BRYAN STREET KISSIMMEE, FL 34741

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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 Signature, typed or printed name of registorod 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 P96000049480 DOCUMENT# NAME DVG MANAGEMENT, INC. STREET ADDRESS 515 WEST BRYAN STREET CITY-ST-ZIP KISSIMMEE, FL 34741 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

U00000760436 05/25/07-80012-006 500.00

## DO NOT WRITE IN THIS SPACE

DOCUMENT # NAME STREET ADDRESS CITY-SY-ZIP **DOCUMENT** STAPLE CHECK NAME STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

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:

G.A. Kelley - V.P. 4/27/07