

# 2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000001506

**FILED**  
**Jun 27, 2007**  
**Secretary of State**

**Entity Name:** CHAPMAN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

P.O. BOX 14760  
BRADENTON, FL 342804760

**New Principal Place of Business:**

1400 99TH ST. NW  
BRADENTON, FL 34209

**Current Mailing Address:**

P.O. BOX 14760  
BRADENTON, FL 342804760

**New Mailing Address:**

**FEI Number:** 65-0688655      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CHAPMAN, CLIFFORD E  
1400 99TH STREET, N.W.  
BRADENTON, FL 34209    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: CHAPMAN, CLIFFORD E  
Address: 1400 - 99TH STREET, N.W.  
City-St-Zip: BRADENTON, FL 34209

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CLIFFORD E. CHAPMAN

\_\_\_\_\_  
Electronic Signature of Signing General Partner

GP

06/27/2007

\_\_\_\_\_  
Date