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

DO NOT WRITE IN THIS SPACE

DOCUMENT # A96000001853

Entity Name
 COMMERCE FIVE, LTD.

FILED Apr 13, 2007 08:00 A Secretary of State

Principal Place of Business

1610 TENNESSEE AVE. LYNNHAVEN, FL 32444 Mailing Address

1610 TENNESSEE AVE. LYNNHAVEN, FL 32444



03292007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3408484

Applied For Not Applicable

5. Certificate of Status Desired

Ą

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TILLMAN, JEAN F 1610 TENNESSEE AVE. LYNNHAVEN, FL 32444

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered</li></ol>	d agent, or both, in the State of Florida. I am familiar with, and accept
the obligations of registered agent.	
OLONIA TUDE	
SIGNATURE Signature power or printed page of requirement 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.

	The fact of the fa		
	12. GENERAL PARTNER INFORMATION		
	DOCUMENT #	P96000082176	
	NAME	COMMERCE FIVE, INC.	
	STREET ADDRESS	1610 TENNESSEE AVE.	
	CITY-ST-ZIP	LYNNHAVEN, FL 32444	
	DOCUMENT #		
	NAME		
	STREET ADDRESS CITY-ST-ZIP		
	DOCUMENT #		
	NAME		
	STREET ADDRESS		
	CITY-ST-ZIP		
	DOCUMENT /		
STAPLE CHECK HERE	NAME		
	STREET ADDRESS CITY-ST-ZIP	•	
	DOCUMENT #		
	NAME CTOSET ADDRESS		
	STREET ADDRESS CITY-ST-ZIP		
	DOCUMENT #		
	NAME		
	STREET ADDRESS		

## DO NOT WRITE IN THIS SPACE

U00000706447 04/24/07-80032-019 508.75

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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

412/07

820-762-7880

Daylime Pho