


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

DOCUMENT # A96000002525
1. Entity Name
WARD PROPERTIES, LLLP



Principal Place of Business 804 SIXTEENTH STREET PORT ST JOE, FL 32456	Mailing Address BRENDA WARD P. O. BOX 232 PORT ST. JOE, FL 32457
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07 APR 12 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03142007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3414215	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, BRENDA LEE
301 PLEASANT REST RD
WEWAHITCHKA, FL 32465

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00**

500098625815
04/12/07--01010--021 **500.00

**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	REED, MONICA B 16 MIMOSA STREET FT WALTON BEACH, FL 32548
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CLARK, MARGARET E 1845 WEST DAVIES AVENUE LITTLETON, CO 80120
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	WARD, BRENDA LEE 301 PLEASANT REST ROAD WEWAHITCHKA, FL 32465
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE IN THIS SPACE

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: Brenda L. Ward Brenda L. Ward 4/4/07 850 648-8668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #