

## **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

## FILED Jan 11, 2007 08:00 AN te

Due by may 1, 2007				Jan 11, 2007 00.00
DOCU 1. Entity Nau B.A.S. L	me	700000119		Secretary of Sta
Principal Pla 4612 ASHT SARASOTA,		Mailing Address 4612 ASHTON RD. SARASOTA, FL 34233		
		WRITE IN THIS SPA	CE	01082007 No Chg-LP
4612 ASH	L, ROBERTT	ress of Current Registered Agent	7.	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  Signature, typed or printed name of registered agent and title if applicable.  DATE  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.				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L03000040485 BLUE GOOSE, LL			U90000582065 01/11/07-80017-011 500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP  DOCUMENT # NAME				DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP DOCUMENT # HAME 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/eject as if made upder 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, Flanda Statutes.

STAPLE CHECK HERE

SIGNATURE: Robert T. Mitchell, Partner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNE

01/08/2007

941-921-4696

Daysime Phone #