

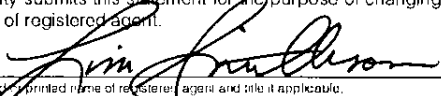
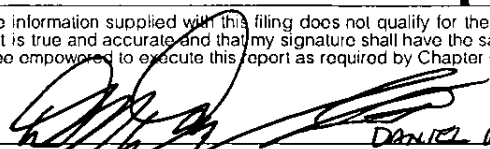


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

DOCUMENT # A97000001548					
1. Entity Name DANBE PROPERTIES, LTD.				FILED 2007 APR 25 AM 10:20 SECRETARY OF STATE TALLAHASSEE, FL 32304	
Principal Place of Business 11001 DANKA WAY NORTH SUITE 3 ST PETERSBURG FL 33716		Mailing Address 11001 DANKA WAY NORTH SUITE 3 ST PETERSBURG FL 33716			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E003 (10/06)	
City & State		City & State		4. FEI Number 59-3461621	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Applied For		Not Applicable			
6. Name and Address of Current Registered Agent SMITHSON, LISA 11201 DANKA CIRCLE NORTH SUITE 120 ST PETERSBURG FL 33716			7. Name and Address of New Registered Agent		
			Name SMITHSON, LISA		
			Street Address (P.O. Box Number is Not Acceptable) 11201 CORPORATE CIRCLE NORTH		
			SUITE 120		
			City ST. PETERSBURG FL		Zip Code 33716
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  LISA SMITHSON 2/21/07					
FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.					
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			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P94000075433 DANIELSON, INC. 11201 DANKA CIRCLE N SUITE 120 ST PETERSBURG FL 33716		STREET ADDRESS	11201 CORPORATE CIRCLE N. #120	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			CITY - ST - ZIP	ST. PETERSBURG, FL 33716	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			STREET ADDRESS		
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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:  DANIEL M. DOYLE 2.21.07 727-520-7711					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date		Daytime Phone #

STAPLE CHECK HERE