

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # A97000001598

1. Entity Name
MAREL ENTERPRISES LIMITED



Principal Place of Business
464054 STATE ROAD 200
YULEE, FL 32097 US

Mailing Address
464054 STATE ROAD 200
YULEE, FL 32097 US



02132007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3466046

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, RONALD R
4646 CARLTON DUNES DR.
#4
FERNANDINA BEACH, FL 32034

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 _____

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.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
ANDERSON, RONALD R
4646 CARLTON DUNES #4
FERNANDINA BEACH, FL 32034

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
ANDERSON, RONALD E
984 STRICKLAND ROAD
DOUGLAS, GA 31535

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/23/07-80078-001 508.75

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IN THIS SPACE

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Ronald R. Anderson
Ronald R. Anderson

3/12/07

Date

904-241-6821

Daytime Phone #

STAPLE CHECK HERE