2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Mari

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED Apr 27, 2007 08:00 Al Secretary of State

	Due by may 1, 2007				Apr 27, 2007 00.0	
DOCUMENT #A9800000036 1. Entity Name MCNEEL CAPITAL LLLP				Secretary of St		
LINCOLN CEN	pe of Business NTER, STE. 751 NNEDY BLVD. 33609	Mailing Address P.O. BOX 23887 TAMPA, FL 33623		 	III BDIII BBAN BBAN ADING WING BINGA BY IBA	
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DO NOT WRITE IN THIS SPACE			A 6 E	04252007 No Chg-LP	CR2E003 (12/06)	
L	JO NOI WKI	HE IN THIS SP	ACE	4. FEI Number 59-3483538	Applied For Not Applicable	
				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of C	urrent Registered Agent	0 * * \(\sigma \)			
	AMES P ESQUIRE ASSOCIATES, P.A.			DO NOT W	RITE	
315 SOUT TAMPA, F	TH HYDE PARK AVENUE L 33606	:		IN THIS SI	PACE	
	e named entity submits this state tions of registered agent.	ment for the purpose of changing its reg	listered office or register	red agent, or both, in the State of Fl	orida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of register				DATE	
	FILE	E NOW!!! FEE IS \$500.00 by 1, 2007, Fee will be \$900.0	0		UNIC	
		NER THAT IS A BUSINESS ENTIT ers MAY NOT be changed on the				
12.	GENERAL PA	ARTNER INFORMATION		,	73. 74.	
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14. I hereby certify that the information supplied with this filling 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

4/25/07 (813) 286-8680

Daytime Phone #