

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

**FILED**  
**Jan 09, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # A98000000408

1. Entity Name  
OETTER ENTERPRISES, LTD.



Principal Place of Business  
4130 NW 16 BLVD  
GAINESVILLE, FL 32605

Mailing Address  
P.O. BOX 14513  
GAINESVILLE, FL 32604



01042007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

59-3492593

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

OETTER, ROBERT L  
4130 NW 16 BLVD  
GAINESVILLE, FL 32605

**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.

U00000580400

01/10/07-80045-012-508.75

**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 OETTER, ROBERT L  
STREET ADDRESS 4130 NW 16 BLVD  
CITY-ST-ZIP GAINESVILLE, FL 32605

DOCUMENT #  
NAME OETTER, W. PETER  
STREET ADDRESS 4130 NW 16 BLVD  
CITY-ST-ZIP GAINESVILLE, FL 32605

DOCUMENT #  
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STREET ADDRESS  
CITY-ST-ZIP

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DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
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:

*William Peter Oetter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Jan 4, 2007

352 375-2129

Date

Daytime Phone #

STAPLE CHECK HERE