

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A98000001070

1. Entity Name
HOWARD HODOR FAMILY LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JAN 22 AM 9:23

Principal Place of Business
3760 NW 83RD STREET
STE 1
GAINESVILLE, FL 32606

Mailing Address
3760 NW 83RD STREET
STE 1
GAINESVILLE, FL 32606



01162007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3508599	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HODOR, HOWARD
3760 NW 83RD STREET
STE 1
GAINESVILLE, FL 32606

**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.

800086144578
01/24/07 01030 012 **500.00
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 #	P96000014844
NAME	HODOR REAL ESTATE COMPANY
STREET ADDRESS	3760 NW 83RD STREET, STE 1
CITY-ST-ZIP	GAINESVILLE, FL 32606

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**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1-16-07 352 336 3996

STAPLE CHECK HERE