2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A98000001217

1. Entity Name KELLY PLANTATION GOLF CLUB, LTD.



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

Principal Place of Business

307 KELLY PLANTATION DR. DESTIN. FL 32541

Mailing Address

307 KELLY PLANTATION DR. DESTIN, FL 32541



DO NOT WRITE IN THIS SPACE

4. FEI Number

04262007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3517641

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLEET, H. BART FLEET, SPENCER, MARTIN & KILPATRICK, PA 1104 EGLIN PARKWAY SHALIMAR, FL 32579-0000 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.	

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 #	P98000015506	
NAME	KELLY PLANTATION GOLF CLUB, INC.	
STREET ADDRESS	307 KELLY PLANTATION DRIVE	
CITY-ST-ZIP	DESTIN, FL 32541	
DOCUMENT #		
NAMŁ		
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		
DOCUMENT #		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-S1-ZIP DOCUMENT # NAME STREET ADDRESS	

DATE

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 TYPE OF PRINTED NAME OF BIGNING GENERAL PARTHER

4-26-07

850-269-8224

Daylime Pho