2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A98000001571

1. Entity Name
GOODMAN FAMILY LIMITED PARTNERSHIP



FILED Apr 11, 2007 08:00 A Secretary of State

Principal Place of Business C/O EVELYN GOODMAN 6245 S.W. 117TH TERRACE MIAMI, FL 33156 Mailing Address

C/O EVELYN GOODMAN 6245 S.W. 117TH TERRACE MIAMI, FL 33156



03122007 No Chg-LP

CR2E003 (12/06)

4.	FEI Number		Applied For	
	65-0850466		Not Applicable	
5.	Certificate of Status Desired		8.75 Additional	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GOODMAN, EVELYN 6245 SW 117 TERRACE MIAMI, FL 33156

DO NOT WRITE IN THIS SPACE

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 \$900.0	U00000701308 04/20/07-80041-024 500	. 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 #	P98000057461					
NAME	GOODMAN GENERAL PARTNER, INC.					
STREET ADDRESS	6245 S.W. 117TH TERRACE					
CITY-ST-ZIP	MIAMI, FL 33156					
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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						

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