

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # A98000001737 1. Entity Name THE ANTAEUS LIMITED PARTNERSHIP OF FORT PIERCE	
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Principal Place of Business 3200 N. A-1-A HI-WAY #710 FT PIERCE, FL 34949	Mailing Address 8014 STATE LINE, #203 LEAWOOD, KS 66208
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04062007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-2805489	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SNYDER, WILLARD B 3200 N. A-1-A HI-WAY #710 FT PIERCE, FL 34949

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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	SNYDER, WILLARD B
STREET ADDRESS	3200 N. A-1-A HI-WAY #710
CITY-ST-ZIP	FT PIERCE, FL 34949
DOCUMENT #	
NAME	SNYDER, ROLF D
STREET ADDRESS	8014 STATE LINE #203
CITY-ST-ZIP	LEAWOOD, KS 66208
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000710951
04/25/07-80059-025 500.00

**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: Willard B Snyder / Gen Partner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

11 Apr 07 913/642-5134
Date Daytime Phone #

Willard B Snyder

STAPLE CHECK HERE