

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

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

DOCUMENT # A98000001933 1. Entity Name MCKENZIE PROPERTIES, LIMITED	
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Principal Place of Business 6500 CAROLINE STREET MILTON, FL 32570	Mailing Address 6500 CAROLINE STREET MILTON, FL 32570
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03292007 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3533376	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MCKENZIE, JOHN D 6500 CAROLINE STREET MILTON, FL 32570

**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	MCKENZIE, JOHN D
STREET ADDRESS	6500 CAROLINE STREET
CITY-ST-ZIP	MILTON, FL 32570
DOCUMENT #	
NAME	MCKENZIE, MARY T
STREET ADDRESS	6500 CAROLINE STREET
CITY-ST-ZIP	MILTON, FL 32570
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000712841
04/26/07-80051-022 500.00

**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 680, Florida Statutes

SIGNATURE: X  (John D. McKenzie) **4-4-07** (850) 623-3481

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE