


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Feb 09, 2007 08:00 AM
Secretary of State

DOCUMENT # A98000001970 1. Entity Name DOVERSPIKE FAMILY, LTD.	
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Principal Place of Business 10675 QUAIL COVEY ROAD BOYNTON BEACH, FL 33436	Mailing Address 10675 QUAIL COVEY ROAD BOYNTON BEACH, FL 33436
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DO NOT WRITE IN THIS SPACE



01022007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0879530	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BELSON, STEVEN A 2500 N. MILITARY TRAIL, STE. 465 BOCA RATON, FL 33431

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00	
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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 STREET ADDRESS CITY-ST-ZIP	P98000091250 DOVERSPIKE CORPORATION 10675 QUAIL COVEY ROAD BOYNTON BEACH, FL 33436
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02/19/07-80004-015 500.00

**DO NOT WRITE
IN THIS SPACE**

**PLEASE SIGN
& DATE**

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: <u>Eleanor M. Doverspike</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<u>2/6/07</u> <small>Date</small>	<u>561-738-7750</u> <small>Daytime Phone #</small>
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STAPLE CHECK HERE