2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

DO NOT WRITE IN THIS SPACE

DOCUMENT # A98000002220

1. Entity Name STONINGTON FAMILY LIMITED PARTNERSHIP



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1009 OCEAN SHORE BLVD. ORMOND BEACH, FL 32176 395 SOUTH ATLANTIC AVE., #103 ORMOND BEACH, FL 32176



01062007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 58-2427898

busthan Barres 4/9/07

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARRES, JONATHAN 1009 OCEAN SHORE BLVD. ORMOND BEACH, FL 32176

SIGNATURE:

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		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 Signature, typed or printed name of registered agent and title of applicable		
	FILE NOWIN FEE IS \$500.00 After May 1, 2007, Fee will be \$900.	Ţ.
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 #	L98000001954	
NAME .	STONINGTON PARENTS, LLC	
STREET ADDRESS	1009 OCEAN SHORE BLVD.	
CITY-ST-ZIP	ORMOND BEACH, FL 32176	
DOCUMENT #		U00000746556
NAME		05/16/07-80073-019 500.00
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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 accordate 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 exercise this report as required by Chapter 620. Florida Statutes		

D OR PRINTED NAME OF SIGNING GENERAL PARTNER