


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

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| DOCUMENT # A98000002438 1. Entity Name LAKEVIEW TERRACE, LTD. |  |
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SECRETARY OF STATE
 TALLAHASSEE FLORIDA



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| Principal Place of Business 1250 LAKEVIEW DRIVE DELAND, FL 32720 | Mailing Address 506 CHESAPEAKE DRIVE TARPON SPRINGS, FL 34689 |
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| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address | 4042007 Chg-LP CR2E003 (12/06) |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | |
| City & State | City & State | 4. FEI Number 59-3541669 |
| Zip | Country | 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 BURAL, RONALD M 506 CHESAPEAKE DRIVE TARPON SPRINGS, FL 34689 | 7. Name and Address of New Registered Agent Name <u>Margaretha J. Bural</u> Street Address (P.O. Box Number Is Not Acceptable) <u>506 Chesapeake Dr</u> City <u>Tarpon Springs</u> <u>FL</u> Zip Code <u>34689</u> |
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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] DATE 4/8/07

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 | | 13. ADDITIONAL PARTNERS | |
|---------------------------------|--------------------------|-------------------------|-------------------------------|
| DOCUMENT # | NAME BURAL, RONALD M | STREET ADDRESS | 04/19/07--01003--011 **605.00 |
| STREET ADDRESS | 506 CHESAPEAKE DRIVE | CITY-ST-ZIP | |
| CITY-ST-ZIP | TARPON SPRINGS, FL 34689 | | |
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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.

SIGNATURE: Ronald M. Bural TRUSTEE OF THE BURAL MANAGEMENT TRUST DATE 4/8/07 DAYTIME PHONE # 727-938-4513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE