

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

FILED

07 AUG 27 PM 2:10

CLERK OF SUPERIOR COURT
 TALLAHASSEE, FLORIDA

DOCUMENT #A99000000163

1. Entity Name
BCM PARTNERS, LTD.



Principal Place of Business
**1500 SAN REMO AVENUE
 SUITE 203
 CORAL GABLES, FL 33156**

Mailing Address
**1500 SAN REMO AVENUE
 SUITE 203
 CORAL GABLES, FL 33156**

2. Principal Place of Business - No P.O. Box #
1325 Miller Road
 Suite, Apt. #, etc.
Suite D

3. Mailing Address
P. O. Box 26765
 Suite, Apt. #, etc.

City & State
Greenville, SC

City & State
Greenville, SC

07182007 Chg-LP CR2E003 (12/06)

4. FEI Number
65-0903110

Applied For
 Not Applicable

Zip
29607

Country
US

Zip
29616

Country
US

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOYETT, JAMES L
 1500 SAN REMO
 SUITE 203
 CORAL GABLES, FL 33146**

7. Name and Address of New Registered Agent

Name
James L. Boyett
 Street Address (P.O. Box Number is Not Acceptable)
1500 San Remo Ave.
Suite #190
 City **Coral Gables** **FL** Zip Code **33146**

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 *James L. Boyett*
 Signature, typed or printed name of registered agent and filed if applicable.

7/19/07
 DATE

**FILE NOW!!! FEE IS \$500.00
 Due by September 14, 2007**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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. ADDRESS CHANGES ONLY

DOCUMENT # **569419**
 NAME **BOYETT PROPERTIES, INC.**
 STREET ADDRESS **1500 SAN REMO, SUITE 203**
 CITY-ST-ZIP **CORAL GABLES, FL 33146**

STREET ADDRESS **1325 Miller Road - Suite D**
 CITY-ST-ZIP **Greenville, SC 29607**

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STREET ADDRESS
 CITY-ST-ZIP

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: *James L. Boyett*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/19/07
 Date

Daytime Phone #

STAPLE CHECK HERE