

**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED
Mar 02, 2007 08:00 A
Secretary of State

DOCUMENT # A99000001214	
1. Entity Name W.E. FRANK FAMILY LIMITED PARTNERSHIP	

Principal Place of Business C/O W.E. FRANK 2284 CRAYTON ROAD NAPLES FL 34103	Mailing Address C/O W.E. FRANK 2284 CRAYTON ROAD NAPLES FL 34103
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E003 (10/06)

4. FEI Number 59-3591497		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NAPLES-LAWDOCK, INC. C/O QUARLES & BRADY LLP 1395 PANTHER LANE, STE. 300 NAPLES FL 34109-7874		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	

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 W.E. FRANK 2/15/07
Signature, typed or printed name of registered agent and date if applicable. DATE

FILE NOW!!! Fee is \$500. * After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.**

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 # NAME STREET ADDRESS CITY - ST - ZIP	FRANK, W E 2284 CRAYTON ROAD NAPLES FL 34103	STREET ADDRESS CITY - ST - ZIP	000000654808 03/13/07-86881-001 500.00
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	FRANK, MILDRED B 2284 CRAYTON ROAD NAPLES FL 34103	STREET ADDRESS CITY - ST - ZIP	
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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: W.E. FRANK 2/15/07 239-9616071
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE