

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B04000000104

Entity Name: NEFES NEVADA LP

**FILED**  
**Apr 26, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

1504 US HWY 395 N  
#8  
GARDNERVILLE, NV 89410

**New Principal Place of Business:**

**Current Mailing Address:**

2002 SOUTHSIDE BLVD  
100C  
JACKSONVILLE, FL 32216

**New Mailing Address:**

2743-1 ANNISTON RD  
JACKSONVILLE, FL 32246

FEI Number: 88-0461885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COFFIELD, H.W.  
2743 ANNISTON RD  
JACKSONVILLE, FL 32246 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P04000041294  
Name: NEFES INC.  
Address: 1504 US HWY 395N #8  
City-St-Zip: GARDNERVILLE, NV 89410

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: H W COFFIELD

V P

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date