## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000014340

CHARTER PARTNERS, LLC

Principal Place of Business

121 N. KENTUCKY AVENUE LAKELAND, FL 33801 US



Mailing Address

121 N. KENTUCKY AVENUE LAKELAND, FL 33801 US

## **FILED** Mar 27, 2007 08:00 A Secretary of State



01092007 No Chg-LLC

CR2E083 (11/05)

4.	. FEI Number			
	01-0781073			

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6.	Name	and Add	ress of Curre	nt Registered Agent	t

HOLDEN, JEFFREY K 121 N. KENTUCKY AVENUE LAKELAND, FL 33801

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>						
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE			
Fi Di	ling Fee is \$50.00 ue by May 1, 2007		•			
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLDEN, JEFFREY K 121 N. KENTUCKY AVENUE LAKELAND, FL 33801					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000631338 04/04/07-80040-001 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN .	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•			
NAME STREET ADDRESS CITY-S1-ZIP		•				
11. I hereby certify that the information supplies 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 managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						

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PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE