


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # A96000002158 1. Entity Name SANSING FAMILY PARTNERSHIP, LTD.	
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Principal Place of Business 4875 MANOLETE ST. PENSACOLA, FL 32504	Mailing Address 4875 MANOLETE ST. PENSACOLA, FL 32504
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Zip Country	City & State Zip Country



01172007 Chg-LP CR2E003 (12/06)

4. FEI Number 59-3418211	Applied For <input type="checkbox"/> Not Applicable	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 SANSING, ROBERT C 4875 MANOLETE ST. PENSACOLA, FL 32504	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and file 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. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	UDD0000606534 01/31/07-88801-007 500.00
	STREET ADDRESS		
	CITY-ST-ZIP		
DOCUMENT #	NAME	STREET ADDRESS	
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DOCUMENT #	NAME	STREET ADDRESS	
	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: *Robert C. Sansing* Robert C. Sansing ✓ 1-19-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE