


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY 22 PM 3:51

DOCUMENT # A05000001550

1. Entity Name
PALAFox LANDING, LTD.



Principal Place of Business
**300 N. W. 12TH AVENUE
 MIAMI, FL 33128**

Mailing Address
**300 N. W. 12TH AVENUE
 MIAMI, FL 33128**

2. Principal Place of Business - No P.O. Box #
302 Barcelona Street
 Suite, Apt. #, etc.


3. Mailing Address
302 Barcelona Street
 Suite, Apt. #, etc.

City & State
Pensacola, FL

City & State
Pensacola, FL

Zip
32501

Country



04222008 Chg-LP CR2E003 (12/06)

4. FEI Number
20-3267661

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**DOMINGUEZ, AGUSTIN
 300 N.W. 12TH AVENUE
 MIAMI, FL 33128**

7. Name and Address of New Registered Agent

Name
Daniel Horvath

Street Address (P.O. Box Number is Not Acceptable)
302 Barcelona Street

City
Pensacola

FL Zip Code
32501

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: *Daniel R. Horvath* **Daniel R. Horvath** DATE: *4/22/08*

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

900129675369
05/16/08--01012--023 **508.75

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 #	P05000105610	STREET ADDRESS	
NAME	CEII PALAFOX, INC.	CITY-ST-ZIP	
STREET ADDRESS	302 N BARCELONA STREET		
CITY-ST-ZIP	PENSACOLA, FL 32502		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: *Daniel R. Horvath* **Daniel R. Horvath, Resident** DATE: *4/22/08* 000/505-1274-1205

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #