

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 APR 15 PM 12:23

DOCUMENT # A06000000694

1. Entity Name
 AOH-REGENT LIMITED PARTNERSHIP



Principal Place of Business
 7334 BLANCO ROAD
 SUITE 200
 SAN ANTONIO, TX 78216

Mailing Address
 7334 BLANCO ROAD
 SUITE 200
 SAN ANTONIO, TX 78216

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

04072008 Chg-LP CR2E003 (12/06)

4. FEI Number

~~APPLIED FOR~~ 20-4934932

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
 2731 EXECUTIVE PARK DRIVE
 SUITE 4
 WESTON, FL 33331

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

Signature, typed or printed name of registered agent and title if applicable

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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

CITY - ST - ZIP

AOH-REGENT GP, INC.
 7334 BLANCO ROAD
 SAN ANTONIO, TX 78216

STREET ADDRESS

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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:

DUSTIN PREZENT *DAVID STARR* PRESIDENT 4/9/08

Date

210-341-8097

Daytime Phone #

STAPLE CHECK HERE

BLT