FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 APR 17 AM 11: 37

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A07000000833

1. Entity Name
RESH FAMILY PARTNERSHIP, LLLP

Principal Place of Business
6525 THE LANDINGS DRIVE
ORLANDO, FL 32812

Mailing Address
6525 THE LANDINGS DRIVE
ORLANDO, FL 32812

03172008 Chg-LP CR2E003 (12/06)

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

4. FEI Number 26-0618385 ☐ 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
DELOACH BRYANT, CARLA ESQ 1206 EAST RIDGEWOOD ST. ORLANDO, FL 32803	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 ____________________ DATE ____
Signature, typed or printed name of registered agent and title if applicable.

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	RESH, WAREN W	STREET ADDRESS	
STREET ADDRESS	6525 THE LANDINGS DRIVE		500123844625
CITY-ST-ZIP	ORLANDO, FL 32812	CITY-ST-ZIP	04/17/08--01006--001 **500.00
DOCUMENT #			
NAME	RESH, CLARYNE V	STREET ADDRESS	
STREET ADDRESS	6525 THE LANDINGS DRIVE		
CITY-ST-ZIP	ORLANDO, FL 32812	CITY-ST-ZIP	
DOCUMENT #			
NAME		STREET ADDRESS	
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DOCUMENT #			
NAME		STREET ADDRESS	
STREET ADDRESS			
CITY-ST-ZIP		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: Mrs. Claryne V. Resh or Mr. Warren W Resh