

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000000749

FILED
Jan 13, 2009
Secretary of State

Entity Name: RAYSAL LIMITED PARTNERSHIP

Current Principal Place of Business:

405 SEVENTH ST., S.E.
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 232
JASPER, FL 32052

New Mailing Address:

405 SEVENTH ST., S.E.
JASPER, FL 32052

FEI Number: 59-3197958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONINE, BETTE C
405 SEVENTH ST., S.E.
JASPER, FL 32052 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

GENERAL PARTNER INFORMATION:

Document #:

Name: SALLY CAMPMORITZ AND BETTE CAMP CONINE, CO

Address: 405 SEVENTH ST., S.E.

City-St-Zip: JASPER, FL 32052

ADDRESS CHANGES ONLY:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BETTE C CONINE

GP

01/13/2009

Electronic Signature of Signing General Partner

Date