


**2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2008**

**FILED  
Mar 07, 2008 08:00 A  
Secretary of State**

**DOCUMENT # A93000000811**

1. Entity Name  
**SHADY NOOK LIMITED**



Principal Place of Business C/O GAINESVILLE REAL ESTATE MANAGEMENT CO. 2040 N.W. 67TH PLACE GAINESVILLE, FL 32653	Mailing Address C/O GAINESVILLE REAL ESTATE MANAGEMENT CO. 2040 N.W. 67TH PLACE GAINESVILLE, FL 32653
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01092008 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3203483</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CRUTCHER, KEITH A  
2040 N.W. 67TH PLACE  
GAINESVILLE, FL 32653**

**DO NOT WRITE  
IN THIS SPACE**

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

DOCUMENT #	P92000006734
NAME	GAINESVILLE REAL ESTATE MANAGEMENT CO., INC
STREET ADDRESS	2040 N.W. 67TH PLACE
CITY-ST-ZIP	GAINESVILLE, FL 32653
DOCUMENT #	
NAME	
STREET ADDRESS	
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U00000850865  
03/25/08-80007-012 500.00

**DO NOT WRITE  
IN THIS SPACE**

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: Keith Crutcher President Keith Crutcher 2/19/08 352-376-4939

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #