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

DOCUMENT # A03000000845

1. Entity Name

VERNER FAMILY LIMITED PARTNERSHIP, LTD.



FILED Apr 10, 2008 08:00 A Secretary of State

Principal Place of Business

4556 34TH STREET, S.W. ORLANDO, FL 32811

Mailing Address

POST OFFICE BOX 618146 ORLANDO, FL 32811



04072008 No Chg-LP

CR2E003 (12/06)

4. FEI Number		Applied For
56-2382012		Not Applicable
5. Certificate of Status Desired	\$8.7 Fee R	Additional iired

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

COLD, KATHLEEN ESQUIRE ONE INDEPENDENT DRIVE SUITE 2301

JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

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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.				
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 #	P03000062152				
NAME	RDVERNER, INC.	The section of the se			
STREET ADDRESS	4556 34TH STREET, S.W.		Thomasansan Marketta		
CITY-ST-ZIP	ORLANDO, FL 32811		04/22/08-80099-014 500 00		
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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:

CITY-ST-ZIP

STAPLE CHECK HERE

SHATURE AND OF PRINTED NAME OF SIGNING THE PARTNER

8/08 407-425-3467