

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Jan 03, 2008  
Secretary of State**

DOCUMENT# A00000000421

**Entity Name:** H. S. SEKHON LIMITED PARTNERSHIP

**Current Principal Place of Business:**

5275 ENCLAVE DRIVE  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

5275 ENCLAVE DRIVE  
OLDSMAR, FL 34677

**New Mailing Address:**

FEI Number: 59-3640160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'CONNOR, PATRICK M ESQ.  
2240 BELLEAIR ROAD, SUITE 160  
CLEARWATER, FL 33764 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: H.S. SEKHON, L.C.  
Address: 5275 ENCLAVE DRIVE  
City-St-Zip: OLDSMAR, FL 34677

**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: H.S.SEKHON

\_\_\_\_\_  
Electronic Signature of Signing General Partner

G.P.

01/03/2008

\_\_\_\_\_  
Date