2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A00000000863

ALACHUA HOLDINGS, LTD.



FILED Mar 11, 2008 08:00 Al Secretary of State

Principal Place of Business

13505 NW 88TH PL ALACHUA, FL 32615 Mailing Address

P.O. BOX 1990 ALACHUA, FL 32616



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02062008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3659814 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

TOMPKINS, DARRYL J P.A. 14420 NW 151ST BLVD ALACHUA, FL 32615

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	0-0.00	
	enamed entity submits this statement for the purpose of changing its tions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accep
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 \$90	U00000854551
		TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	P00000045446	
NAME	ALACHUA MANAGEMENT COMPANY	
STREET ADDRESS	13505 NW 88TH PL	
CITY-ST-ZIP	ALACHUA, FL 32615	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT /		
VALVE		

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STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS 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:

NATURE AND TYPED OR PRINTED MANIE OF SIGNING GENERAL PARTICER