2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A00000000988

1. Entity Name

LEISNER FAMILY LIMITED PARTNERSHIP

Principal Place of Business

536 BLAKE ROAD SOUTH DAYTONA, FL 32119 Mailing Address

536 BLAKE ROAD

SOUTH DAYTONA, FL 32119

FILED Apr 04, 2008 08:00 All Secretary of State



DO NOT WRITE IN THIS SPACE

03242008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3240521

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TUMBLESON, J. DOYLE ESQ. 150 S. PALMETTO AVENUE, BOX A DAYTONA BEACH, FL 32114

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The above named entity submits this statement for the purpose of changing its registered office of the obligations of registered agent. Comparison Comp	or registered agent, or both, in the State of Florida. Lam familiar with, and accept 100000381965 $04/16/08-80021-025-500$, (II)
SIGNATURE : Signature, typed or priviled name of registered agent and title if applicable	DATE
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 # NAME STREET ADDRESS CITY-SY-ZIP	L0000007112 LEISNER ENTERPRISES, L.C. 536 BLAKE ROAD SOUTH DAYTONA, FL 32119
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-S1-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - STZIP	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET AUDRESS	

DO NOT WRITE
IN THIS SPACE

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 at required by Chapter 620, Florida Statutes

SIGNATURE:

CHY-ST-ZIP

STAPLE CHECK HERE

SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING GENERAL PA

03-31-2008

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