

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A00000001006

1. Entity Name
TURNBERRY NASHVILLE PARTNERS, LP

Principal Place of Business

19501 BISCAYNE BLVD
SUITE 400
AVENTURA, FL 33180

Mailing Address

19501 BISCAYNE BLVD
SUITE 400
AVENTURA, FL 33180

FILED
 08 APR -1 AM 10:57

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



02202008 No Chg-LP

CR2E003 (12/06)

4. FEI Number

65-1017489

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARTGLASS, LORI R
19501 BISCAYNE BLVD
SUITE 400
AVENTURA, FL 33180DO 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

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 \$900.00

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 # P00000060016
 NAME TURNBERRY NASHVILLE PARTNERS INC
 STREET ADDRESS 19501 BISCAYNE BLVD SUITE 400
 CITY-ST-ZIP AVENTURA, FL 33180

DOCUMENT #
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 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

000122233430
 04/04/08--01009--010 **\$50.00

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 as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #