## **FILED** 2008 LIMITED PARTNERSHIP ANNUAL REPORT Apr 07, 2008 08:00 A Secretary of State **Due By May 1, 2008 DOCUMENT # A00000001075** 1. Entity Name HUNTER, LTD. Principal Place of Business Mailing Address 1 SLEIMAN PARKWAY, #270 1 SLEIMAN PARKWAY, #270 JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216 01112008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3651373 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITE, ROBERT K DO NOT WRITE 1 SLEIMAN PARKWAY, #270 JACKSONVILLE, FL 32216 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, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 D4/16/08-80048-010 500.00 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 SLEIMAN, HUNTER STREET ADDRESS 1 SLEIMAN PARKWAY, #270 CITY-ST-ZIF JACKSONVILLE, FL 32216 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-7IP

14. I hereby certify that the information supplied with this thing does not quality 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, Plorida Statutes.

SIGNATURE:

DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-17-08

704-731-2806

Daytime Phone #