

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # A00000001141

1. Entity Name
M & H LIMITED PARTNERSHIP, LLLP



Principal Place of Business
**9625 AMBLESIDE DRIVE
WINDERMERE, FL 34786**

Mailing Address
**9625 AMBLESIDE DRIVE
WINDERMERE, FL 34786**



01042008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3659510

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BARNES, CAROL
9625 AMBLESIDE DRIVE
WINDERMERE, FL 34786**

**DO 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 #	
NAME	BARNES MANAGEMENT, L.L.C.
STREET ADDRESS	9625 AMBLESIDE DRIVE
CITY-ST-ZIP	WINDERMERE, FL 34786
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	

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01/08/08-80024-012 500.00

**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: *Carol Barnes* **Carol Barnes**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-4-08

Date

407-295-5200

Daytime Phone #

STAPLE CHECK HERE