

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 APR 11 AM 10:02

DOCUMENT # A00000001512

1. Entity Name
ELOISE C. TURNER, LTD.



Principal Place of Business
**252 NW CALI DR
LAKE CITY, FL 32055**

Mailing Address
**252 NW CALI DR
LAKE CITY, FL 32055**



04032008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3599430

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FRAZIER, W. ROBINSON
1515 RIVERSIDE AVENUE, STE. A
JACKSONVILLE, FL 32204**

**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 # **P03000010539**
NAME **TURNER REALTY MANAGEMENT, INC.**
STREET ADDRESS **252 NW CALI DR**
CITY-ST-ZIP **LAKE CITY, FL 32055**

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300122503433
04/08/08--01004--015 **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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/3/08

Date

352-494-0806

Daytime Phone #

DEBRA D. CHILDRESS

STAPLE CHECK HERE