2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A0000001614

3277 FRUITVILLE ROAD

SARASOTA, FL 34237

Address:

City-St-Zip:

Entity Name: SARASOTA 100 LIMITED PARTNERSHIP

FILED Aug 07, 2008 Secretary of State

| Current Principal Place of Business: | | ess: | New Principal Place of Business: | | |
|--------------------------------------|-------------------------------|--------------------------------------|----------------------------------|---------------------------------------|--|
| | TVILLE ROAD | | | | |
| UNIT E SARASOT <i>I</i> | ۹, FL 34237 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| P.O. BOX 1 SARASOTA | 5026 A, FL 34277 | | | | |
| | e with s. 607.193(2)(b), F.S. | , the limited partnership did not re | • | Certificate of Status Desired (X) | |
| Name and | Address of Current Re | egisterea Agent: | Name and Address o | f New Registered Agent: | |
| | WILLIAM MOORE FVILLE ROAD | | | | |
| | A, FL 34237 US | | | | |
| The above in the State | | is statement for the purpose o | f changing its registered | d office or registered agent, or both | |
| SIGNATUR | E: | | | | |
| | Electronic Signatu | re of Registered Agent | | Date | |
| GENERAL PA | ARTNER INFORMATION: | | ADDRESS CHANGES ONL | Y: | |
| Document #: | P00000099209 | | | | |
| Name: | SARASOTA 100 INC. | | | | |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: S. W. MOORE PRES 08/07/2008