


**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2008**

**FILED**  
**Mar 14, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # A01000000097</b>	
1. Entity Name: <b>NKST FAMILY LIMITED PARTNERSHIP, LLLP</b>	

Principal Place of Business <b>210 EAST MAIN STREET BARTOW FL 33830</b>	Mailing Address <b>P.O. BOX 1382 BARTOW FL 33831</b>
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	County	Zip	County

1st MOORE CR2E003 (10/07)

4. FEI Number <b>59-3693429</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>NELLE KENNEDY STUART TERRY 210 E MAIN ST BARTOW FL 33830</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and if not applicable

**FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2008, fee will be \$900. \*\*\* Make check payable to Florida Department of State.**

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	<b>NELLE KENNEDY STUART TERRY 210 EAST MAIN ST. BARTOW FL 33830</b>	STREET ADDRESS	<b>U00000858851 04/01/08-80062-005 500.00</b>
NAME		CITY-ST-ZIP	
STREET ADDRESS			
DOCUMENT #	<b>FLEETWOOD TAIT LANE, JR. 2201 CUMBERLAND AVE. CHARLOTTE NC 28203</b>	STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			

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.

**Nelle Kennedy Stuart Terry, General Partner**  
**SIGNATURE: *Nelle Kennedy Stuart Terry* 3/11/08 863/533-4196**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE