2008 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2008 DOCUMENT # A01000000355

1. Entity Name

FEAGLE FAMILY LIMITED PARTNERSHIP



Principal Place of Business

153 NE MADISON ST. LAKE CITY, FL 32055 Mailing Address

POST OFFICE BOX 1653 LAKE CITY, FL 32056-1653

FILED Apr 24, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01032008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3707103

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FEAGLE, MARLIN M 153 NE MADISON ST LAKE CITY, FL 32055

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, 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

U00000920707 05/14/08-80053-024 500.00

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 STREET ADDRESS CITY: ST-ZIP	FEAGLE, MARLIN M 153 NE MADISON STREET LAKE CITY, FL 32055
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14. I hereby certify that the information supplied with this filling 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