

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

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # A01000000876	
1. Entity Name THE GRADY & SADIE SINGLETON FAMILY LIMITED PARTNERSHIP, LTD.	

Principal Place of Business 1800 EAST ATLANTIC BOULEVARD POMPANO BEACH FL 33060	Mailing Address 1800 EAST ATLANTIC BOULEVARD POMPANO BEACH FL 33060
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2. Principal Place of Business No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

1st MOORE CR2E003 (10/07)

4. FEI Number 65-1123884	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HINKLE, DARRYL L 2600 NE 14TH ST POMPANO BEACH FL 33062	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Numbers Not Acceptable) City FL 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 date if 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 # NAME STREET ADDRESS CITY-ST-ZIP	P01000064781 SINGLETON MANAGEMENT, INC. 1800 EAST ATLANTIC BOULEVARD POMPANO BEACH FL 33060	STREET ADDRESS CITY-ST-ZIP	
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, 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:

Charles M. Singleton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/26/08
DATE

Business Phone #