2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001056

1. Entity Name

TALLAHASSEE HIGHPOINT PARTNERS, LTD.



FILED
Apr 23, 2008 08:00 AN
Secretary of State

Principal Place of Business

1000 N. ORLANDO AVE., STE. D WINTER PARK, FL 32789 Mailing Address

P.O. BOX 276

WINTER PARK, FL 32790



01082008 No Chg-LP

CR2E003 (12/06)

Fee Required

4. FEI Number		Applied For
59-3739555		Not Applicable
5. Certificate of Status Desired	\$8.75	Additional

.

6. Name and Address of Current Registered Agent

STRONG, DAVID C 1000 N. ORLANDO AVE., STE. D WINTER PARK, FL 32789

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.

U00000917892

SIGNATURE

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

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 #	P01000075427
NAME	STRONG HIGHPOINT, INC.
STREET ADDRESS	1000 N. ORLANDO AVE., STE. D
CITY-ST-ZIP	WINTER PARK, FL 32789
DOCUMENT /	
NAME	
STREET ADDRESS	
GITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT ≠	
NAME	
STREET ADDRESS	
CATY-ST-ZIP	
DOCUMENT ≠	
NAME	
STREET ADDRESS	
CITY: ST-ZIP	
	· · · · · · · · · · · · · · · · · · ·

DO NOT WRITE IN THIS SPACE

1. Thereby 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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/18/08

107620-1200

Daytime Phone #