


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 29, 2008 08:00 AM
Secretary of State

DOCUMENT # A01000001393 1. Entity Name BAER INVESTMENT MANAGEMENT LIMITED PARTNERSHIP	
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Principal Place of Business CORAL HARBOR CLUB 88181 OLD HIGHWAY, APT. #C-42 ISLAMORADA, FL 33036	Mailing Address CORAL HARBOR CLUB 88181 OLD HIGHWAY, APT. #C-42 ISLAMORADA, FL 33036
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02022008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1144134	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FICK, RONALD L ESQ. C/O DUWODY WHITE & LONDON, P.A. 239 SOUTH COUNTY ROAD, SUITE 300 PALM BEACH, FL 33480

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	U000000844115 03/12/08-20023-004 500.00 <small>DATE</small>
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FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	
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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 #	P01000040823
NAME	BAER INVESTMENT MANAGEMENT, INC.
STREET ADDRESS	88181 OLD HIGHWAY, APT. C-42
CITY-ST-ZIP	ISLAMORADA, FL 33036
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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

SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	2 Feb 08 <small>Date</small>	3058522789 <small>Daytime Phone #</small>
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STAPLE CHECK HERE