2008 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2008**

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001558

STAPLE CHECK HERE

SIGNATURE:

1. Entity Name
JAMES E. RAY FAMILY PARTNERSHIP, LTD.



FILED Apr 10, 2008 08:00 Al Secretary of State

Principal Place of Business

163 GULF SHORE DR SANTA ROSA BEACH, FL 32459 Mailing Address

163 GULF SHORE DR

SANTA ROSA BEACH, FL 32459



04082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3758731

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAY, JAMES E 163 GULF SHORE DR SANTA ROSA BEACH, FL 32459

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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 Signature, typed or printed name of registered agent and title if applicable OATE		
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 #	P00000093620	
NAME	JAMES E. RAY GENERAL PARTNER, INC.	
STREET ADDRESS	163 GULF SHORE DR	
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459	
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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 accurage 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 repuired by Chapter 620, Florida Statutes		