


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

<b>DOCUMENT # A02000000125</b> 1. Entity Name <b>THE LINKS AT TERRA CEIA, LTD.</b>	
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**FILED**  
**08 FEB -8 PM 3:22**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business <b>10404 SPOONBILL RD W</b> <b>BRADENTON, FL 34209</b>	Mailing Address <b>611 19TH AVE. W.</b> <b>PALMETTO, FL 34221</b>
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2. Principal Place of Business - No P.O. Box # <b>611 19th Ave. W.</b>	3. Mailing Address Suite, Apt. #, etc.
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01162008 Chg-LP CR2E003 (12/06)

City & State <b>Palmetto FL</b>	City & State Suite, Apt. #, etc.
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4. FEI Number <b>32-0070809</b>	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent <b>MATTHEWS, TERENCE ESQ</b> <b>5190 26TH ST. WEST, STE. D</b> <b>BRADENTON, FL 34207</b>	7. Name and Address of New Registered Agent Name <b>Gerald J. Snyder</b> Street Address (P.O. Box Number is Not Acceptable) <b>611 19th Ave. W.</b> City <b>Palmetto</b> <b>FL</b> Zip Code <b>34221</b>
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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 *Gerald J. Snyder* DATE \_\_\_\_\_  
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	13. ADDRESS CHANGES ONLY
DOCUMENT # NAME <b>SNYDER, GERALD J</b> STREET ADDRESS <b>611 19TH AVE. W.</b> CITY-ST-ZIP <b>PALMETTO, FL 34221</b>	STREET ADDRESS CITY-ST-ZIP
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**000117313950**  
**02/06/08--01040--007 \*\*500.00**

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: *Gerald J. Snyder* **1-16-08** **941-721-1706**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE