

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 25 AM 10:44

DOCUMENT # A02000001074 1. Entity Name BAGLEY DEVELOPMENT PARTNERSHIP, LTD.					
Principal Place of Business 4404 S. FLORIDA AVE., STE. #2 LAKE LAND, FL 33813			Mailing Address 4404 S. FLORIDA AVE., STE. #2 LAKE LAND, FL 33813		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3355184	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LANCASTER, JOHN J 500 SOUTH FLORIDA AVENUE, SUITE 800 LAKE LAND, FL 33801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				Applied For Not Applicable	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.				DATE _____	
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 #	P02000085394		STREET ADDRESS	4404 S. Florida Avenue, Ste. #2	
NAME	BAGLEY ENTERPRISES, INC.		CITY-ST-ZIP	Lakeland, FL 33813	
STREET ADDRESS	4200 FOREST HILLS DRIVE		STREET ADDRESS		
CITY-ST-ZIP	LAKE LAND, FL 33813		CITY-ST-ZIP		
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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: R. Kent Williams 4/09/08 Date _____ Daytime Phone # _____