


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY -6 AM 8:54

DOCUMENT # A02000001081 1. Entity Name BECKER B-14 GROVE, LTD.	
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Principal Place of Business 3150 CARDINAL DR. VERO BEACH, FL 32963	Mailing Address 3150 CARDINAL DR. VERO BEACH, FL 32963
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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01162008 Chg-LP CR2E003 (12/06)

4. FEI Number 01-0740515	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HURLEY, THOMAS 2627 S JENKINS RD FT PIERCE, FL 34981	7. Name and Address of New Registered Agent Name: Hurley, Thomas Street Address (P.O. Box Number is Not Acceptable): 3150 Cardinal Drive City: Vero Beach FL Zip Code: 32963
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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: Thomas Hurley DATE: 4/28/08

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 STREET ADDRESS CITY-ST-ZIP	L02000019290 BECKER SISTERS MANAGEMENT, LLC 3150 CARDINAL DR. VERO BEACH, FL 32963	STREET ADDRESS CITY-ST-ZIP	900128357903 05/05/08--01008--021 **500.00
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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: Thomas Hurley DATE: 4/28/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE