

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

**FILED**

**08 APR 21 PM 3:54**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # A03000000742**

1. Entity Name

**O2B KIDS COLLEGE 2, LTD.**



Principal Place of Business

**4929 NW 43RD STREET, BLDG. B  
GAINESVILLE, FL 32606**

Mailing Address

**C/O 106 NW 33RD CT., #A  
GAINESVILLE, FL 32607**



04042008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**20-0031114**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**O2B MANAGER ALACHUA, LLC  
106 NW 33RD CT.,  
SUITE A  
GAINESVILLE, FL 32607**

**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

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

DOCUMENT # **L05000116561**  
NAME **O2B MANAGER ALACHUA, LLC**  
STREET ADDRESS **106 NW 33 COURT SUITE A**  
CITY-ST-ZIP **GAINESVILLE, FL 32607**

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**700123955817  
04/18/08--01006--003 \*\*500.00**

**DO NOT WRITE  
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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:**

*Peter A. Sherrard, Jr.*  
**Peter A. Sherrard, Jr.**

**4/10/08**

**352-338-9660**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Telephone #

STAPLE CHECK HERE