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

DO NOT WRITE IN THIS SPACE

## FILED Feb 21, 2008 08:00 AN Secretary of State

DOCUM	FNT	# A	വദവാ	າດດເ	10992
しんんしいい		# /		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Entity Name

THE STAUBACH COMPANY - FLORIDA HOLDINGS LIMITED PARTNERSHIP



Principal Place of Business

200 S. ORANGE AVENUE

SUITE 1400 ORLANDO, FL 32801 Mailing Address

121 WEST TRADE STREET

SUITE 2800 CHARLOTTE, NC 28202

CR2E003 (12/06)

01242008 No Chg-LP 4. FEI Number

Applied For

4. FEI Number 20-0122889

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

## 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 - U00000834671 2729709-90002-002 |

\_02/29/08-80002-002\_500\_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 / NAME STREET ADDRESS CITY+ST-ZIP	L03000025066 BLAREN, LLC 121 WEST TRADE STREET, SUITE 2800 CHARLOTTE, NC 28202
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STRATMAN, MARK A 200 S. ORANGE AVENUE, SUITE 1400 ORLANDO, FL 32801
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

## DO NOT WRITE IN THIS SPACE

14. Thereby 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 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 employered to execute his report as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

9- D

1-20.08

TO4-943-2200

Date

Daylime Phone #