

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 11 PM 2:45

DOCUMENT # A03000001212	
1. Entity Name MYERS DEVELOPMENT GROUP, LTD.	



Principal Place of Business 5586 BROADCAST COURT SARASOTA, FL 34240	Mailing Address 5586 BROADCAST COURT SARASOTA, FL 34240
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2. Principal Place of Business - No P.O. Box # 5308 Paylor Lane Suite, Apt. #, etc.	3. Mailing Address 5308 Paylor Lane Suite, Apt. #, etc.
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City & State Sarasota, FL 34240	City & State Sarasota, FL
Zip 34240	Country USA



02102008 Chg-LP CR2E003 (12/06)

4. FEI Number 36-4539537	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MYERS, RALPH 5586 BROADCAST COURT SARASOTA, FL 34240	
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7. Name and Address of New Registered Agent Name: Ralph Myers Street Address (P.O. Box Number is Not Acceptable): 5308 Paylor Lane City: Sarasota FL Zip Code: 34240	
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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: <u>Ralph Myers</u> DATE: <u>2/11/08</u>	
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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 #	P03000093124	STREET ADDRESS	5308 Paylor Lane
NAME	MYERS DEVELOPMENT, INC.	CITY-ST-ZIP	Sarasota, FL 34240
STREET ADDRESS	5586 BROADCAST COURT		
CITY-ST-ZIP	SARASOTA, FL 34240		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

100120708001
 03/19/08--01010--002 **500.00

STAPLE CHECK HERE

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: <u>Ralph Myers</u>	DATE: <u>2/11/08</u> PHONE: <u>941-9079622</u>