

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A04000000495 1. Entity Name SEMBLER FAMILY PARTNERSHIP #33, LTD.					
Principal Place of Business 5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707			Mailing Address 5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707		
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 20-0933444	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHER, CRAIG 5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707				7. Name and Address of New Registered Agent Name SEMBLER, GREGORY S. Street Address (P.O. Box Number is Not Acceptable) 5858 CENTRAL AVENUE City ST. PETERSBURG FL Zip Code 33707	
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><i>Gregory S. Sembler</i></u> PRESIDENT DATE 4-23-08					
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 #	P96000003312		STREET ADDRESS		
NAME	SEMBLER RETAIL, INC.		CITY-ST-ZIP		
STREET ADDRESS	5858 CENTRAL AVENUE		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33707		CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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><i>Ronald P. Wheeler</i></u> RONALD P. WHEELER DATE 4/24/08 DAYTIME PHONE # 727-384-6000					

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FILED
 08 APR 30 AM 8:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



02282008 Chg-LP CR2E003 (12/06)

4. FEI Number
20-0933444 Applied For
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHER, CRAIG
 5858 CENTRAL AVENUE
 ST. PETERSBURG, FL 33707

Name **SEMBLER, GREGORY S.**
 Street Address (P.O. Box Number is Not Acceptable)

5858 CENTRAL AVENUE

City **ST. PETERSBURG FL** Zip Code **33707**

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SIGNATURE

Gregory S. Sembler
 Signature, typed or printed name of registered agent and title if applicable.

PRESIDENT

4-23-08
 DATE

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13. ADDRESS CHANGES ONLY

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 CITY-ST-ZIP

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 SEMBLER RETAIL, INC.
 5858 CENTRAL AVENUE
 ST. PETERSBURG, FL 33707

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04/30/08--01052--013 **508.75

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #