


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Mar 18, 2008 08:00 A
Secretary of State

DOCUMENT # A04000000847 1. Entity Name SELCHRIS, LTD.	
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Principal Place of Business 300 INTERNATIONAL PARKWAY SUITE 300 HEATHROW, FL 32746	Mailing Address 300 INTERNATIONAL PARKWAY SUITE 300 HEATHROW, FL 32746
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01082008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1160763	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 SELBY, C. THOMAS 300 INTERNATIONAL PARKWAY SUITE 300 HEATHROW, FL 32746

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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 _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	DATE 000000862904 04/03/08-80066-015 500.00
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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	CTS HOLDING, LLC
STREET ADDRESS	300 INTERNATIONAL PARKWAY, SUITE 300
CITY-ST-ZIP	HEATHROW, FL 32746
DOCUMENT #	
NAME	KAC HOLDING, LLC
STREET ADDRESS	300 INTERNATIONAL PARKWAY, SUITE 300
CITY-ST-ZIP	HEATHROW, FL 32746
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

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:  Katherine A. Christy 1-25-08 407-333-1604	Date	Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		