

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

**FILED  
Apr 15, 2008 08:00 AM  
Secretary of State**

DOCUMENT # A05000000207	
1. Entity Name PRESERVES OF OAKWOOD, LTD.	
Principal Place of Business 4233 GLOUCESTER RD BROOKSVILLE, FL 34604 US	Mailing Address 4233 GLOUCESTER RD BROOKSVILLE, FL 34604 US



04082008 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-2267671	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, GLORIA S  
4233 GLOUCESTER RD  
BROOKSVILLE, FL 34604

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
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**

**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	WILLIAMS, GLORIA S 4233 GLOUCESTER RD BROOKSVILLE, FL 34604
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	WHITNEY, JOSHUA M 4233 GLOUCESTER ROAD BROOKSVILLE, FL 34604
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	HANSEN, VANESSA W 4233 GLOUCESTER ROAD BROOKSVILLE, FL 34604
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04/28/08-80022-024 500.00

**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: Gloria S. Williams Gloria S. Williams 4-9-08 352-754-9619  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone