2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # A05000001594

1. Entity Name

FLORIDA CAPITAL REAL ESTATE PARTNERS 25, LTD.



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

Principal Place of Business

300 INTERNATIONAL PARKWAY

SUITE 300

HEATHROW, FL 32746

Mailing Address

300 INTERNATIONAL PARKWAY

SUITE 300

HEATHROW, FL 32746



01082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-3308617 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTY, KATHERINE A 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	DATE
FILE NOWIII FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	U00000862805 04/03/08-80066-012 500.00

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.

14.	GENERAL! ANTINETITI GIMIATION
DOCUMENT #	L05000079530
NAME.	FCLC 25, LLC
STREET ADDRESS	300 INTERNATIONAL PARKWAY STE 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	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY+ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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14. I hereby 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 empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Christy 1-25-0

407-333-1604

Daylime Phone #