2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A05000001720 FILED A. RONALD HUDSON & DAVID JACKSON APARTMENTS 08 FEB 19 PM 4:07 LTD SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4640 58TH AVENUE 4640 58TH AVENUE VERO BEACH, FL 32967 VERO BEACH, FL 32967 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042008 CR2E003 (12/06) Applied For City & State City & State 4. FEI Number APPLIED FOR Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUDSON, A. RONALD Street Address (P.O. Box Number is Not Acceptable) **4640 58TH AVENUE** VERO BEACH, FL 32967 City Zip Code 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 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 ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS MAME HUDSON, A. RONALD STREET ADDRESS **4640 58TH AVENUE** CITY-ST-ZIP CITY-ST-ZIF VERO BEACH, FL 32967 DOCUMENT # STREET ADDRESS JACKSON, DAVID JR. NAME STREET ADDRESS 4145 28TH AVENUE CITY-ST-ZIP CITY-ST-7IP VERO BEACH, FL 32967 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCHMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADCRESS NAME STREET ADDRESS CITY+ST-7IP CITY-ST-ZIP 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 employee to execute, this report as required by Chapter 620, Florida Statutes