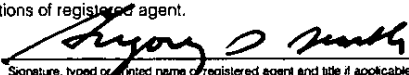
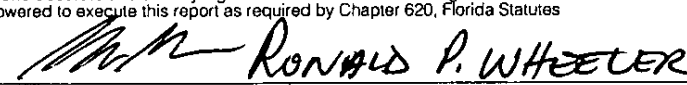


**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

|  |   |                     |   |   |  |
|--|---|---------------------|---|---|--|
| <b>DOCUMENT # A05000001932</b><br>1. Entity Name<br><b>THE SEMBLER PARTNERS, LLLP</b>  |   |                     |   |  |  |
| Principal Place of Business<br><b>5858 CENTRAL AVE.<br/>ST. PETERSBURG, FL 33707</b>   |   |                     | Mailing Address<br><b>5858 CENTRAL AVE.<br/>ST. PETERSBURG, FL 33707</b>  |   |  |
| 2. Principal Place of Business - No P.O. Box #   |   | 3. Mailing Address  |   |   |  |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, etc. |   |   |  |
| City & State   |   | City & State        |   |   |  |
| Zip  | Country   | Zip                 | Country   | 4. FEI Number<br><b>20-3647513</b>  |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |   |                     |   | Applied For<br><input type="checkbox"/> Not Applicable                            |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SHER, CRAIG<br/>5858 CENTRAL AVE.<br/>ST. PETERSBURG, FL 33707</b>   |   |                     | 7. Name and Address of New Registered Agent<br>Name <b>SEMBLER, GREGORY S.</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>5858 CENTRAL AVENUE</b><br>City <b>ST. PETERSBURG FL</b> Zip Code <b>33707</b> |   |  |
| 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.<br>SIGNATURE  DATE <b>4-24-08</b><br><small>Signature, typed or printed name of registered agent and title if applicable.</small>   |   |                     |   |   |  |
| <b>FILE NOW!!! FEE IS \$500.00</b><br><b>After May 1, 2008, Fee will be \$900.00</b>   |   |                     |   |   |  |
| <b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b><br><b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>  |   |                     |   |   |  |
| 12. GENERAL PARTNER INFORMATION  |   |                     | 13. ADDRESS CHANGES ONLY  |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <b>P05000099045<br/>SEMBLER PARTNERS, INC.<br/>5858 CENTRAL AVE.<br/>ST. PETERSBURG, FL 33707</b> |                     | STREET ADDRESS<br><br>CITY - ST - ZIP   |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   |                     | STREET ADDRESS<br><br>CITY - ST - ZIP   |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   |                     | STREET ADDRESS<br><br>CITY - ST - ZIP   |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   |                     | STREET ADDRESS<br><br>CITY - ST - ZIP   |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   |                     | STREET ADDRESS<br><br>CITY - ST - ZIP   |   |  |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   |                     | STREET ADDRESS<br><br>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<br>SIGNATURE:  <b>RONALD P. WHEELER</b> Date <b>4-24-08</b> Daytime Phone # <b>727-384-6000</b> |   |                     |   |   |  |

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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