


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


**FILED  
Apr 10, 2008 08:00 AM  
Secretary of State**

**DOCUMENT # A05000001981**  
1. Entity Name  
226 KING ST. PARTNERSHIP LTD



Principal Place of Business      Mailing Address  
226 W. KING ST.                      133 BLANCO ST.  
SAINT AUGUSTINE, FL 32084    US      SAINT AUGUSTINE, FL 32084    US

**DO NOT WRITE IN THIS SPACE**



02252008 No Chg-LP      CR2E003 (12/06)

4. FEI Number <b>54-2138133</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LANG, BOBBY R  
133 BLANCO ST.  
SAINT AUGUSTINE, FL 32084

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

1000000990541  
04/22/08 08:00 DATE 007 500.00

**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	LANG, BOBBY R 133 BLANCO ST. SAINT AUGUSTINE, FL 32084
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	LANG, KEVIN R 87 KEITH ST SAINT AUGUSTINE, FL 32084
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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:** Bobby R. Lang      **BOBBY R. LANG GEN PART**      4/8/08      904-825-0684  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #