2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

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

$D \cap C$		MFN	IT	# A	OF	in	വ	Ω	M2 .	79
ווווו	U JI	יו חועו	J I	# /	w	יטנ	vu	v	<i>י</i> עעו	כו

1. Entity Name

FLORIDA CAPITAL REAL ESTATE PARTNERS 26, LTD

6. Name and Address of Current Registered Agent



Principal Place of Business

Mailing Address

300 INTERNATIONAL PARKWAY, STE. 300 HEATHROW, FL 32746

300 INTERNATIONAL PARKWAY, STE. 300 HEATHROW, FL 32746



01082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-4342581	 Applied Not Appl		
5. Certificate of Status Desired	\$8.75	Additional guired	

DO NOT WRITE IN THIS SPACE

CHRISTY, KATHERINE A

DO NOT WRITE

	MATIONAL PARKWAT, STE. 300						
HEATHRC	DW, FL 32746	IN THIS SPACE					
	named entity submits this statement for the purpose of changing its regions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept					
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 \$900.0	000000862807 04/03/08-80066-013 500.00					
	NOTE: General Partners MAY NOT be changed on the	TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.					
12.	GENERAL PARTNER INFORMATION	,					
DOCUMENT /	L06000018178						
NAMÜ	FCLC 26, LLC	;					
STRLET ADDRESS	300 INTERNATIONAL PARKWAY, STE. 300						
CITY-ST-ZIP	HEATHROW, FL 32746						
DOCUMENT /							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
DOCUMENT #							
NAME							
STREET ADDRESS		DO NOT WRITE					
CITY-ST-ZIP							
DOCUMENT #		IN THIS SPACE					
NAME							
STREET ADDRESS	 						
CITY-ST-ZIP							
DOCUMENT#							
NAME		•					
STREET ADDRESS	<u> </u>	,					
CITY-ST-ZIP							
DOCUMENT # NAME							
STREET ADDRESS							
CHILL UPPUESS !	1	■ I					

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING SENERAL PARTNER