2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # A06000000817

1. Entity Name

PALMETTO 1331, LLLP

Principal Place of Business
1331 PALMETTO AVENUE, 1ST FLOOR
WINTER PARK FL 32789

Mailing Address
PO BOX 144
WINTER PARK FL 32790

1st MOORE CR2E003 (10/07)

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number 20-5117660 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRICE, PAMELA O
301 EAST PINE STREET, SUITE 1400
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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. * After May 1, 2008, fee will be $900. *** Make check payable to Florida Department of State.**

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P06000086453	STREET ADDRESS	
NAME	PALMETTO 1331 MANAGEMENT, INC.		
STREET ADDRESS	P.O. BOX 144	CITY-ST-ZIP	
CITY-ST-ZIP	WINTER PARK FL 32790		
DOCUMENT #		STREET ADDRESS	H00000032844
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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: [signature] 2/7/08 407 628-3443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #