


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

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 MAR 14 AM 8:34

<b>DOCUMENT # A06000000988</b>		
1. Entity Name PLANTATION GARDENS, LP		

Principal Place of Business 316 RICARDO ROAD MILL VALLEY, CA 94941	Mailing Address 316 RICARDO ROAD MILL VALLEY, CA 94941
--	--

2. Principal Place of Business - No P.O. Box # <b>655 REDWOOD HIGHWAY</b>	3. Mailing Address <b>655 REDWOOD HIGHWAY</b>
Suite, Apt. #, etc. <b>SUITE 285</b>	Suite, Apt. #, etc. <b>SUITE 285</b>
City & State <b>MILL VALLEY, CA</b>	City & State <b>MILL VALLEY CA</b>
Zip <b>94941</b>	Country <b>USA</b>



02202008 Chg-LP CR2E003 (12/06)

4. FEI Number <b>20-5538618</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331	7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>M06000004377</b> <b>ST. REGIS PROPERTIES, LLC</b> <b>316 RICARDO ROAD</b> <b>MILL VALLEY, CA 94941</b>	STREET ADDRESS CITY - ST - ZIP	<b>655 REDWOOD HIGHWAY, SUITE 285</b> <b>MILL VALLEY CA 94941</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<b>600120878256</b> <b>03/21/08--01007--014 **500.00</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS 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

**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**3/1/08** **415 381-8800**  
Date Daytime Phone #

STAPLE CHECK HERE