

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

**FILED
Apr 24, 2008 08:00 AM
Secretary of State**

DOCUMENT # A06000001300 1. Entity Name MARY E. CARLTON RANCH, LTD.	
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Principal Place of Business 5825 IDEAL HOLDING ROAD FT. PIERCE, FL 34987	Mailing Address 5825 IDEAL HOLDING ROAD FT. PIERCE, FL 34987
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DO NOT WRITE IN THIS SPACE



04092008 No Chg-LP	CR2E003 (12/06)
4. FEI Number 20-5919007	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NORVELL, ANN
5825 IDEAL HOLDING ROAD
FT. PIERCE, FL 34987

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 _____ 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**

U00000920640
05/14/08-80053-006 500.00

**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 #	L06000097500
NAME	MEC RANCH MANAGEMENT, LLC
STREET ADDRESS	5825 IDEAL HOLDING ROAD
CITY-ST-ZIP	FT. PIERCE, FL 34987
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Ann Norvell 4-22-08 772-441-2117
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE