

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # A06856

1. Entity Name
FOXMEADOW APARTMENTS, LTD.



Principal Place of Business
P.O. BOX 546
CHIPLEY, FL 32428

Mailing Address
P.O. BOX 546
CHIPLEY, FL 32428



01072008 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-1880721

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARSWELL, DAVID C.
1259 MAIN STREET
CHIPLEY, FL 32428

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 \$500.00
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 **BHIDE, VASANT P.**
STREET ADDRESS **1329 KINGSLEY AVENUE**
CITY-ST-ZIP **ORANGE PARK, FL**

DOCUMENT #
NAME **CARSWELL, DAVID C.**
STREET ADDRESS **1259 MAIN ST.**
CITY-ST-ZIP **CHIPLEY, FL**

DOCUMENT #
NAME **HALL, E. WENDELL**
STREET ADDRESS **1329 KINGSLEY AVENUE**
CITY-ST-ZIP **ORANGE PARK, FL**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000777307
01/10/08-80003-005 508.75

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:

David C. Carswell

Jan. 8, 2008 850 638-7070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE