2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA **DOCUMENT # A07000000373** 1. Entity Name STEVENS L&C, LLLP OR MAR 12 AM 8: 41 Principal Place of Business Mailing Address 292 N. HOLLANDTOWN ROAD 292 N. HOLLANDTOWN ROAD WAUCHULA, FL 33873 WAUCHULA, FL 33873 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01292008 CR2E003 (12/06) City & State Applied For City & State 4. FEI Number 20-88534 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEVENS, PETER J 292 N. HOLLANDTOWN ROAD Street Address (P.O. Box Number is Not Acceptable) WAUCHULA, FL 33873 City 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. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. DOCUMENT # STREET ADDRESS STEVENS, CHARLES R JR NAME STREET ADDRESS 292 N. HOLLANDTOWN ROAD CITY-ST-ZIP CITY-ST-ZIP WAUCHULA, FL 33873 DOCUMENT # STREET ADDRESS STEVENS, PETER J STREET ADDRESS 292 N. HOLLANDTOWN ROAD CITY-ST-ZIP CITY-ST-ZIP WAUCHULA, FL 33873 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME -STREET ADDRESS CITY-ST-ZIP CITY-ST+ZIP DOCUMENT # STREET ADDRESS NAME 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 cath; 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