
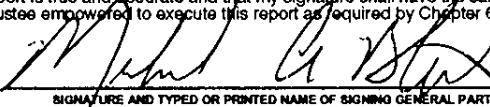


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # A07000001045 1. Entity Name BLANTON DEVELOPMENT, LTD.					
Principal Place of Business 10335 GULF BEACH HIGHWAY, UNIT 808 PENSACOLA, FL 32507			Mailing Address P.O. BOX 3256 PENSACOLA, FL 32516		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 26-1260461	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BLANTON, MICHAEL A 10335 GULF BEACH HIGHWAY, UNIT 808 PENSACOLA, FL 32507			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
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 #	L07000080145		STREET ADDRESS		
NAME	BLANTON MANAGEMENT, L.L.C.		CITY - ST - ZIP		
STREET ADDRESS	10335 GULF BEACH HIGHWAY, UNIT 808		000000854267 03/27/08-80001-001 500.00		
CITY - ST - ZIP	PENSACOLA, FL 32507		STREET ADDRESS		
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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: 			Michael A. Blanton 3/6/08 856 456-16031		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

STAPLE CHECK HERE