2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 12, 2008

DOCUMENT # A07000001281

1. Entity Name
ATM METABOLICS LLLP

FILED
08 AUG 29 PM 1:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
6039 CYPRESS GARDENS BOULEVARD 238 WINTER HAVEN, FL 33884 US	6039 CYPRESS GARDENS BOULEVARD 238 WINTER HAVEN, FL 33884 US

08202008 Chg-LP CR2E003 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 42-1746963 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~MCCLANE, JEFFERSON B~~ ~~215 EAST LIVINGSTON STREET~~ ~~ORLANDO, FL 32801~~ ~~XXXXXXXXXXXX~~	Robert Sammons 1556 Sixth Street Winter Haven, FL 33880
	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
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS $500.00
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	~~K07000060351~~	STREET ADDRESS	
NAME	~~FLORIDA TECHNOLOGY MANAGERS LLC~~	CITY-ST-ZIP	
STREET ADDRESS	~~6039 CYPRESS GARDENS BOULEVARD 238~~		
CITY-ST-ZIP	~~WINTER HAVEN, FL 33884~~		
DOCUMENT #		STREET ADDRESS	900135142049
NAME	Daryl L Thompson	CITY-ST-ZIP	08/29/08--01034--019 #52.50
STREET ADDRESS	409 Bayou Road		
CITY-ST-ZIP	Winter Haven, FL 33884		
DOCUMENT #		STREET ADDRESS	08/29/08-01034-018
NAME	M Joseph Ahrens	CITY-ST-ZIP	#456.25
STREET ADDRESS	775 W Pierce Street		
CITY-ST-ZIP	Lake Alfred, FL 33850		
DOCUMENT #	M08000001944	STREET ADDRESS	
NAME	Cypress Shores, A Nevada LLC	CITY-ST-ZIP	
STREET ADDRESS	297 Kingsbury Grade D-4470		
CITY-ST-ZIP	Lake Tahoe (Stateline) NV 8944		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: X _____ MILTON AHRENS 25 AUG 08 863 259 0415
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #