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

## **FILED** Apr 17, 2008 08:00 All Secretary of State **DOCUMENT # A07087** 1. Entity Name REGIONAL ENTERPRISES, LLLP Mailing Address Principal Place of Business 1230 AIRPORT ROAD P.O. BOX 908 DESTIN, FL 32540-0908 DESTIN, FL 32541 01162008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-1353299 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CARTER, JOSEPH J JR. DO NOT WRITE 1049 SUNSET DRIVE LAKE WALES, FL 33853 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, 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 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 filled to change a general partner GENERAL PARTNER INFORMATION 12. DOCUMENT # NAME -CARTER, JOSEPH J., JR. AS TRUSTEE STREET ADDRESS 1049 SUNSET DRIVE City-St-7IP LAKE WALES, FL 338534226 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-7IP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP

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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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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