

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 MAY 28 AM 11:16

DOCUMENT # A09896	
1. Entity Name PERRY APARTMENTS, LTD.	

Principal Place of Business 4315 PABLO OAKS COURT, SUITE 1 JACKSONVILLE, FL 32224-9667	Mailing Address 4315 PABLO OAKS COURT, SUITE 1 JACKSONVILLE, FL 32224-9667
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address 1002 W. 23rd Street
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 400
City & State	City & State Panama City, FL
Zip	Country U.S.A.
Country	Zip 32405

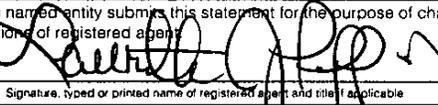


04082008 Chg-LP CR2E003 (12/06)

4. FEI Number 59-2132508	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HARDIN, JENNIFER L 4315 PABLO OAKS COURT, SUITE 1 JACKSONVILLE, FL 32224-9667	7. Name and Address of New Registered Agent Name: Laretta J. Pippin Street Address (P.O. Box Number is Not Acceptable): 1002 W. 23rd Street, Suite 400 City: Panama City FL Zip Code: 32405
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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:  Laretta J. Pippin DATE: 4/10/08

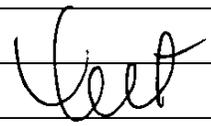
Signature, typed or printed name of registered agent, and title if applicable DATE

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	STOKES, E CHESTER JR	STREET ADDRESS	
NAME	4315 PABLO OAKS CT., SUITE 1	CITY-ST-ZIP	
STREET ADDRESS	JACKSONVILLE, FL 322249667		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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CITY-ST-ZIP			

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 06/03/08--01021--009 **500.00



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:  Laretta J. Pippin, Secretary DATE: 4/10/08 Attorney in Fact (850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE