


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

<b>DOCUMENT # A22661</b> 1. Entity Name <b>SEMBLER FAMILY PARTNERSHIP #4, LTD.</b>	
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FILED  
 08 APR 30 AM 8:35  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business <b>5858 CENTRAL AVENUE</b> <b>ST. PETERSBURG, FL 33707</b>	Mailing Address <b>P.O. BOX 41847</b> <b>ST. PETERSBURG, FL 33743</b>
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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02282008 Chg-LP CR2E003 (12/06)

4. FEI Number <b>59-2708240</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent <b>SHER, CRAIG</b> <b>5858 CENTRAL AVE.</b> <b>ST. PETERSBURG, FL 33707</b>	
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7. Name and Address of New Registered Agent Name <b>SEMBLER, GREGORY S.</b> Street Address (P.O. Box Number is Not Acceptable) <b>5858 CENTRAL AVENUE</b> City <b>ST. PETERSBURG FL</b> Zip Code <b>33707</b>	
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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 <u><i>Gregory S. Sembler</i></u> <b>President</b> DATE <b>4-23-08</b> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	
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**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 # <b>V25013</b> NAME <b>SEMBLER ENTERPRISES, INC.</b> STREET ADDRESS <b>5858 CENTRAL AVENUE</b> CITY-ST-ZIP <b>ST. PETERSBURG, FL 33707</b>	STREET ADDRESS CITY-ST-ZIP <b>800127463868</b> <b>04/30/08--01055--024 **508.75</b>

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: *Ronald P. Wheeler* **RONALD P. Wheeler** 4/24/08 727-384-6000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE