2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008

FILED
Apr 11, 2008 08:00 AI
Secretary of State

DOCUMENT # A23311

1. Entity Name

GAINESVILLE OFFICE ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
% VON HAGKE INTERNATIONAL, INC. 625 WALNUT RIDGE DRIVE SUITE 101 HARTLAND WI 53029-8803	% VON HAGKE INTERNATIONAL, INC. 625 WALNUT RIDGE DRIVE SUITE 101 HARTLAND WI 53029-8803

1st MOORE CR2E003 (10/07)

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

4. FEI Number 39-1558519 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE FL 32202

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

FILE NOW!!! Fee is $500. * After May 1, 2008, fee will be $900. *** Make check payable to Florida Department of State.**

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 #	P11288	STREET ADDRESS	
NAME	VHI DEVELOPMENT CORP.		
STREET ADDRESS	625 WALNUT RIDGE DRIVE	CITY-ST-ZIP	U00000893205 04/23/08-80096-016 500.00
CITY-ST-ZIP	HARTLAND WI 53029-8803		
DOCUMENT #		STREET ADDRESS	
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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: Volkmar von Hagke 3/29-08
Pres., VHI Development Corp.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #