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

DO NOT WRITE IN THIS SPACE

## 

1. Entity Name
THE TAMPA DOWNTOWN INVEST, LTD.



FILED Jan 24, 2008 08:00 Secretary of Stat

Principal Place of Business

4350 W CYPRESS STREET

SUITE 300

TAMPA, FL 33607-4175

Mailing Address

4350 W CYPRESS STREET

SUITE 300

TAMPA, FL 33607-4175



01082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number Applied For 59-2858606 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

COLBERT, HAL P C/O COLLIERS ARNOLD 4350 WEST CYPRESS STREET, SUITE 300 TAMPA, FL 33607-4175

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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 lamiliar 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 filed to change a general partner.

i	12.	GENERAL PARTNER INFORMATION
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	F21736 DR. SCHROBSDORFF & DR. HERRMANN INTERNATIO 4350 W CYPRESS STREET, SUITE 300 TAMPA, FL 336074175
-	DCCUMEIT / NAIJE STREET ADDRESS GITY-ST-ZIP	
	DOCUMENT / MAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMENT / NAME STREET ADDRESS CATY-ST-ZIP	
	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMENT / NAME STREET ADDRESS	1

U00000796167 01/29/08-80022-005 500.00

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14. I hereby certify that the information supplied with this filling 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 it made under eath; 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: .

STAPLE CHECK HERE

TYPED OR PRINTED NAME OF SIGNING TENERAL PARTNER

January 11, 2008

Daytime Phone #