2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# A28049

Entity Name: ALL CHILDREN'S MEDICAL OFFICE BUILDING LIMITED PARTNERSHIP

Current Principal Place of Business:

PHYSICIANS OFFICE BUILDING
880 6TH STREET SOUTH SUITE 190
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

PHYSICIANS OFFICE BUILDING
880 6TH STREET SOUTH SUITE 190
ST. PETERSBURG, FL 33701

New Mailing Address:

COGDELL SPENCER
4401 BARCLAY DOWNS DRIVE, SUITE 300
CHARLOTTE, NC 28209

FEI Number: 59-2944240 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARNES, GARY
801 SIXTH STREET, SOUTH
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION:

Document #: K56074
Name: ACHPOB, INC.
Address: 801 SIXTH STREET, SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GARY CARNES 04/17/2009

Electronic Signature of Signing General Partner Date