

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A30434

**FILED**  
**Jan 17, 2008**  
**Secretary of State**

**Entity Name:** MN MEDINVEST COMPANY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1107 HAZELTINE BLVD.  
SUITE 200  
CHASKA, MN 55318

**New Principal Place of Business:**

1107 HAZELTINE BLVD  
SUITE 200  
CHASKA, MN 55318 US

**Current Mailing Address:**

1107 HAZELTINE BLVD.  
SUITE 200  
CHASKA, MN 55318

**New Mailing Address:**

1107 HAZELTINE BLVD  
SUITE 200  
CHASKA, MN 55318 US

**FEI Number:** 41-0963117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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 #: F97000004441  
Name: JBGE/MEDINVEST, INC.  
Address: 1107 HAZELTINE BLVD., SUITE 200  
City-St-Zip: CHASKA, MN 55318

**ADDRESS CHANGES ONLY:**

Address: 1107 HAZELTINE BLVD SUITE 200  
City-St-Zip: CHASKA, MN 55318 US

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: JOHN B. GOODMAN

GP

01/17/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date