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

SIGNATURE AND TYPED OF PRINTED NAME OF

IGNING GENERAL PARTNER

TALLAHASSEE, FLORIDA DOCUMENT # A30457 1. Entity Name JBL PROPERTIES, LTD. OR MAR 11 PM 2: 48 Principal Place of Business Mailing Address 3800 AIRPORT BLVD., SUITE 200 PO BOX 161506 MOBILE, AL 36608 MOBILE, AL 36616-2506 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 03052008 CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 63-1025857 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Charles H. Edgar, Jr. MELVIN, JACKIE P Street Address (P.O. Box Number is Not Acceptable) STE. 7 2425 W. NINE MILE RD PENSACOLA, FL 32534 2425 W. Nine Mile Rd., Suite 7 Zip Code 32534 Pensacola 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 ggistered agent. Charles H. Edgar, Jr. 3-6-2008 SIGNATURE ent and un it 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. P30422 DOCUMENT # STREET ADDRESS JSBA, INC. 3800 AIRPORT BLVD. STE.200 STREET ADDRESS CITY-ST-ZIP 500120877355 <del>03/21/08--01006--020 \*\*5</del>0 CITY-ST-ZIP MOBILE, AL 36608 DOCUMENT # P30423 STREET ADORESS R. BRUCE WORLEY, INC. NAME 3800 AIRPORT BLVD, STE, 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MOBILE, AL 33608 DOCUMENT # P30421 STREET ADDRESS ELLIS LORD, INC. STREET ADDRESS 3800 AIRPORT BLVD. STE.200 CITY-ST-7IP CITY-ST-ZIP MOBILE, AL 33608 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOGUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-ST-ZIP CITY-ST-7/P 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 equiry d by Chapter 620, Florida Statutes 3-10-2008 251-343-8198 SIGNATURE: L. Ellis Lord

FILED SECRETARY OF STATE

Daytime Phone #