


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

**FILED**  
 08 APR 14 PM 12:00  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

<b>DOCUMENT # A31011</b>	
1. Entity Name OCALA AIRPORT COMMERCE CENTER, LTD.	

Principal Place of Business 11635 NORTHWEST FIRST AVENUE GAINESVILLE, FL 32607	Mailing Address 11635 NORTHWEST FIRST AVENUE GAINESVILLE, FL 32607
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



02012008 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent CURTIS, JOHN M. 11635 NORTHWEST 1ST AVENUE GAINESVILLE, FL 32607	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
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.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	S21687 OCALA ARPT CMRC CNTR, INC 11635 N.W. 1ST AVE. GAINESVILLE, FL	STREET ADDRESS CITY-ST-ZIP	
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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:** \_\_\_\_\_ **Ocala Airport Commerce Center, Inc.**  
 \_\_\_\_\_ **The General Partner** **4/1/2008** **352-332-0838**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER By: **John M. Curtis** Date Daytime Phone #  
**President**

STAPLE CHECK HERE