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

SECRETARY OF STATE DIVISION OF CORPORATIONS

	DOCUMENT # A31081  1. Entity Name JOHNSTONE GROUP, LIMITED						08 MAY 28 AM 10: 38				
	Principal Place of Business & FARVIEW GOLF COURSE 2419 AVON-GENESEO ROAD AVON, NY 14414			Mailing Address 4420 BEACON CIRCLE, SUITE 100 WEST PALM BEACH, FL 33407			H) (10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		THE RELEASE OF THE		
T	2. Principal Place of Business - No PO Box #			3. Mailing Address							
-	Suite. Apt	#, 8IC		Suite, Apt. #, etc.			04232008	Chg-L.P	CR2E003 (12/06)		
ſ	City & State			City & State			4. FEI Number 65-0228	987		Applied For Not Applicable	
	Zip		Country	Zip	Cour	ntry	5. Certificate o	Status Desired		8.75 Additional ee Required	
-	6. Name and Address of Current			t Registered Agent		N	7. Name and A	ddress of New R	legistered A	gent	
-	DAMON, CONRAD					Name			··		
	4420 BEACON CIRCLE					Street Address (P.O. Box Number is Not Acceptable)					
1	SUITE 100 WEST PALM BEACH, FL 33407										
		0010	,			City			FL	Zip Code	
-  -	9. The above payed unlike automic this statement to the auropes of above in					and office or register	rad nanot or both	in the State of El		amilias with and appeal	
	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										
1	Signature, typed or printed name of registered agent and late if applicable DATE										
1	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 th  12. GENERAL PARTNER INFORMATION					e form; an amendment must be filed to change a general partner.  13. ADDRESS CHANGES ONLY					
- 1	DOCUMENT# L94801							AUDRESS OF	ANGES ONL	.1	
	NAME	MILLAR-	FARVIEW CORP.	STHE ( )		#ET AUDITH'SS					
	STREET ADDRESS 2419 AVON-GENESEO ROAD CITY-ST-ZIP AVON, NY 14414				сп	Y-ST-ZIP					
	DOCUMENT #				ST	REET ADDORESS	:	20012		'8818 .	
	STREEL ADDRESS CITY-ST-2P				CIT	Y-ST-ZIP	06/	<u>30013</u> 03/0801	10210	DŽŽŽ <b>()*</b> 500. <b>()</b>	
	DOCUMENT / NAME				SIT	REET ADDRESS					
	STREET ADDRESS CITY-ST-ZIP				CIT	Y-ST-ZIP				<del></del>	
	DOCUMENT #			,	SII	REET ADURESS				7	
HE PE	STREET ADDRESS : CXTY-ST-ZIP				Cil	Y-\$1-ZIP					
E X	DOCUMENT / NAME				sn	HET I ALMHESSS					
STAPLE CHECK	STREET AUDITESS CITY-ST-ZP					IY-ST-ZIP					
STAPL	DOCUMENT # NAME				SI	REET ADDRESS					
	STREET ADDRESS CHY ST-2P					IY-\$1-ZIP					
	14. I hereby indicated or the rec	certify that I on this rep ceiver or tru	the information supplied von is true and accurate a stee empowered to execute the steel empowered the steel empowered to execute the steel empowered the execute the steel empowered to execute the steel empowered the execute the steel empowered to execute the steel empowered the execute the steel empowered to execute the exec	with this filing does not que nd that my signature shall the lhis eport as required to	latify for the chave the san	exemptions contain ne legal effect as if i 20, Florida Statutes	ed in Chapter 119 made under oath;	), Florida Statutes that I am a Gene	I further cearal Partner o	tily that the information title limited partnership	
	SIGNAT	URE:	SIGNATURE AND TYPED	OR PRINTED HANGOF SIGNING	MES	ident {	4/24	Y OX DATe	<u> 362 y</u>	26 8010	