


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

**FILED
Apr 14, 2008 08:00 A.
Secretary of State**

DOCUMENT # A31531 1. Entity Name OLD FLORIDA PLANTATION, LTD.	
--	---

Principal Place of Business 7414 SPARKLING LAKE ROAD ORLANDO, FL 32819	Mailing Address PO BOX 460 SUMMERSVILLE, WV 26651
--	---



DO NOT WRITE IN THIS SPACE

04072008 No Chg-LP	CR2E003 (12/06)
4. FEI Number 59-3088093	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROEDER, LOUIS III
7414 SPARKLING LAKE ROAD
ORLANDO, FL 32819

DO NOT WRITE IN THIS SPACE

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	U00000897843 04/25/08-80064-004 500.00
--	---

**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	
DOCUMENT #	B9500000177
NAME	LUC LAKE HANCOCK LIMITED PARTNERSHIP
STREET ADDRESS	BOX 460, 300 GREENBRIAR RD.
CITY-ST-ZIP	SUMMERSVILLE, WV 26651
DOCUMENT #	ROEDER, LOUIS III
NAME	7414 SPARKLING LAKE ROAD
STREET ADDRESS	ORLANDO, FL 32819
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

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:  **JAMES DAVIS, GENERAL PARTNER IN LUC LAKE** 04/10/2008 (304) 872-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER HANCOCK PARTNER Date Daytime Phone #