

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A31738

1. Entity Name
NAVARRE SQUARE, LTD.



Principal Place of Business
**4142 CARMICHAEL COURT
MONTGOMERY, AL 36106**

Mailing Address
**PO BOX 230758
MONTGOMERY, AL 36123-0758**

FILED

08 APR 21 PM 3:53

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



04012008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

63-1073464

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

**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

Signature, typed or printed name of registered agent and title if applicable.

000123959010

04/18/08--01006--026 **500.00

DATE

**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

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**BROWN, RONALD C.
2626 WINCHESTER ROAD
MONTGOMERY, AL 36106**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**OWENS, GEORGE H.
2932 CHESTNUT STREET
MONTGOMERY, AL 36107**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**SMITH, WILBURN A., JR.
2023 NORMANDIE DRIVE
MONTGOMERY, AL 36111**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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: *Navarre F. L. by Ronald C Brown, Jr. 4/3/08*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE