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

DOCUMENT # A32907

ATLANTIC PINES APARTMENTS, LTD.



FILED Mar 12, 2008 08:00 A Secretary of State

Principal Place of Business

701 WHITE BLVD. INVERNESS, FL 34453

KENNEY, PATRICIA

Mailing Address

P.O. BOX 10293 CLEARWATER, FL 33757



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01052008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3147856 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE

701 WHITE BLVD INVERNESS, FL 34453		IN THIS SPACE
	named entity submits this statement for the purpose of changing its retions of registered agent.	gistered office or registered agent, or both, in the State of Florida I am familiar with, and accept
ȘIGNATURE :	Signature, typed or printed name of registered agent and title if applicable.	DAIE
, ,	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900. A GENERAL PARTNER THAT IS A BUSINESS ENT	ITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
12.	GENERAL PARTNER INFORMATION	form; an amendment must be filed to change a general partner.
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	N31431 FLORIDA LOW IMCOME HOUSING ASSOCIATES, INC 701 WHITE BLVD INVERNESS, FL 34453	03/27/28 000 5 004 8.75
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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 occurate 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 paper as required by Chapter 620, Florida Statutes

SIGNATURE:

NAME OF SIGNING DENERAL PARTNER

Daytime Phone #