


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # A93000000784 1. Entity Name PELICAN ISLE YACHT CLUB PARTNERS, LTD.	
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Principal Place of Business 601 BAYSHORE BOULEVARD, SUITE 960 TAMPA, FL 33606	Mailing Address 601 BAYSHORE BOULEVARD, SUITE 960 TAMPA, FL 33606
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DO NOT WRITE IN THIS SPACE



01112008 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3193580	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 WOLFE, RANDOLPH J 100 N. TAMPA ST. STE. 2700 TAMPA, FL 33602

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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

U000000946393
05/30/08 80043 025 500.00

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 #	A93000000776
NAME	PELICAN ISLE YACHT CLUB ASSOCIATES, LTD.
STREET ADDRESS	601 BAYSHORE BOULEVARD, SUITE 960
CITY-ST-ZIP	TAMPA, FL 33606
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
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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:  **EDWARD R. OELSCHLAEGER** **4-28-08** **813-251-4868**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE