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

## DOCUMENT # A94000001126

1. Entity Name RUTLAND RANCH, LTD.



Principal Place of Business

13535 FEATHERSOUND DR., SUITE 220 CLEARWATER, FL 33762 Mailing Address

13535 FEATHERSOUND DR., SUITE 220 CLEARWATER, FL 33762

## FILED Apr 16, 2008 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03082008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-7030675

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZINO, GARY C/O REGIONS BANK 13535 FEATHERSOUND DR., STE. 220 CLEARWATER, FL 33762

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this</li></ol>	statement for the purpose of changing its regi	stered office or registered agent, o	or both, in the State of Florida.	I am familiar with, and accept
the obligations of registered agent.	The property of the control of the c			,

SIGNATURE

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

DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 U00000901809

/29/08-80085-010-500.00-

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 # NAME STREET ADDRESS CITY-ST-ZIP	REGIONS BANK, TRUSTEE 106 ST. FRANCIS ST. MOBILE, AL 36602
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CHY-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:

TULY JAMO, GOLY CINO

4.9.08

27-592-6915

Dale

Daytime Phone i