2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jul 12, 2007 08:00 AM
Secretary of State

DOCUMENT # A95000002070

1. Entity Name
RNK INVESTMENT PARTNERS, LTD.

Principal Place of Business	Mailing Address
600 W. HILLSBOROUGH BLVD., STE 101 DEERFIELD BEACH, FL 33441	600 W. HILLSBOROUGH BLVD., STE 101 DEERFIELD BEACH, FL 33441

DO NOT WRITE IN THIS SPACE

04032007 No Chg-LP CR2E003 (12/06)

4. FEI Number
65-0626578

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KENNEDY, ROBERT N
600 W. HILLSBOROUGH BLVD., STE 101
DEERFIELD BEACH, FL 33441

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 _____ U00000768458 07/12/07-80012-010 500.00 DATE

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

FILE NOW!!! FEE IS $500.00
After May 1, 2007, 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	KENNEDY, ROBERT N
STREET ADDRESS	600 W. HILLSBORO BLVD., STE 101
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
DOCUMENT #	
NAME	KENNEDY, ANN F
STREET ADDRESS	600 W. HILLSBORO BLVD., STE 101
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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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 _____ _____ _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #