


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

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # A96000000041</b> 1. Entity Name <b>GRADY STANFORD MAULDIN, JR. AND JOAN LEE</b> <b>MAULDING FAMILY LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>97009 BLACKBEARDS WAY</b> <b>YULEE, FL 32097</b>	Mailing Address <b>97009 BLACKBEARDS WAY</b> <b>YULEE, FL 32097</b>
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**DO NOT WRITE IN THIS SPACE**



02112008 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>65-0643318</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**MAULDIN, GRADY S JR**  
**97009 BLACKBEARDS WAY**  
**YULEE, FL 32097**

**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 *Grady S. Mauldin Jr.* 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**

**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	<b>MAULDIN, GRADY S JR</b>
STREET ADDRESS	<b>97009 BLACKBEARDS WAY</b>
CITY-ST-ZIP	<b>YULEE, FL 32097</b>
DOCUMENT #	
NAME	<b>MAULDIN, JOAN L</b>
STREET ADDRESS	<b>97009 BLACKBEARDS WAY</b>
CITY-ST-ZIP	<b>YULEE, FL 32097</b>
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04/03/08-80042-003 500.00

**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: *Grady S. Mauldin Jr.* **3-14-08** **9042613324**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE