


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

**FILED**  
**Feb 06, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A96000000512</b> 1. Entity Name <b>MADISON COVE OF GAINESVILLE LTD.</b>	
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Principal Place of Business <b>20721 S.W. 46TH AVE. NEWBERRY, FL 32669</b>	Mailing Address <b>20721 S.W. 46TH AVE. NEWBERRY, FL 32669</b>
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01302008 No Chg-LP CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3367690</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>DAVIS, NORITA V 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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**

000000918345  
02/15/08-80038-016 508.75

**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	<b>BROWN, LEWIS JR. 4020 NEWBERRY ROAD, SUITE 500 GAINESVILLE, FL 326025068</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>DAVIS, STEFAN M 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669</b>
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**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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**Stefan M. Davis, General Partner**

**1/30/08**

Date

**352-472-7773**

Daytime Phone #

STAPLE CHECK HERE