

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # A96000001134 1. Entity Name NORTHUP FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business 3247 ENCLAVE BAY DR CHATTANOOGA, TN 37415	Mailing Address 7138 SADDLE CREEK CIRCLE SARASOTA, FL 34241
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DO NOT WRITE IN THIS SPACE



01042008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0672901	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

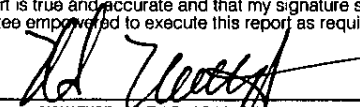
6. Name and Address of Current Registered Agent KRAL, SUSAN 7138 SADDLE CREEK CIRCLE SARASOTA, FL 34241

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____

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	NORTHUP, RONALD S
STREET ADDRESS	3247 ENCLAVE BAY DR
CITY-ST-ZIP	CHATTANOOGA, TN 37415
DOCUMENT #	
NAME	NORTHUP, DIANE T
STREET ADDRESS	3247 ENCLAVE BAY DR.
CITY-ST-ZIP	CHATTANOOGA, TN 37415
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/20/08-80044-006 500.00

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:  Ronald S. Northup 2/4/08 941-923-0684	<small>Signature AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> <small>Date</small> <small>Daytime Phone #</small>

STAPLE CHECK HERE

**DO NOT WRITE
IN THIS SPACE**