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

Due By May 1, 2008								
DOCUMENT # A9600002043  1. Entity Name					FILED			
BARINEAU PROPERTIES, LTD.					08 JAN 30 PM 4: 02			
Principal Place	e of Business	L	i		SECDET.	SECDETABLE OF ATOM		
Principal Place of Business Mailing Address 6905 ATTAPULGUS HWY QUINCY, FL 32351 G905 ATTAPULGUS HWY QUINCY, FL 32351				SECRETARY OF STATE TALLAHASSEE. FLORIDA			STATE LORIDA	
T):	ODGs M. Dowles							
2. Principal P	1977 M. Barbauu 14 Azalea Circle	3. Mailing Addess as M. Barlneau 134 Azalea Circle						
	alabridge, GA 3447	Suite, Addiribridge, GA 3447		01202008	Chg-LP	CR2E00	<u>`                                    </u>	
City & State		City & State			4. FEI Number 59-3410		Applied For Not Applicable	
zip 3 9	819 Country US	<sup>Zip</sup> 39819	Countr	u S		of Status Desired	L ře	8.75 Additional se Required
	6. Name and Address of Current F	kegistered Agent		Name	/. Name and	Address of New Ro	egistered Ag	ent
BETTS, BEN F JR 104 NORTH MAGNOLIA DRIVE TALLAHASSEE, FL 32301				Street Address (P.O. Box Number is Not Acceptable)				
				City FL Zip Code				
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 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						ADDRESS CHA		
DOCUMENT #	BARINEAU, FOY NELLE B 6905 ATTAPUS GUS HWY		STREE	T ADDRESS				
NAME STREET ADDRESS			CITY-S	ST - 71P				
CITY-ST-ZIP			_					
DOCUMENT# NAME	BARINEAU, THOMAS M		STREE	TADORESS				
STREET ADDRESS CITY-ST-ZIP	134 AZALEA CIRCLE BAINBRIDGE, GA 39819		СПУ-	ST-ZIP	400116035744 01/25/0801004025 ***500.00			
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14. I hereby certify that the information supplied with this filing does not quality 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

Thomas n

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1/20/08 850-627-3325