2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Feb 25, 2008 08:00 AN te

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DOCU 1. Entity Nam PRICE W		116		Sec	retary of Sta	
Principal Plac 1009 GREEN WINTER PAR	ITREE DR	Mailing Address 1009 GREENTREE DR WINTER PARK, FL 32789		t icetal: (ale izile civi eeki eeki eeli eeli) ee	EDINE MENI DIREK IMBIL BANDAL BANSAL	
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	The state of the s	ter a trade established from the public and the state of the second established the and the state of the second established the		59-3416879 5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					15° a. 5	
PRICE, PAMELA O 301 E. PINE STREET SUITE 1400 ORLANDO, FL 32801				DO NOT WRI		
	named entity submits this statement for t lions of registered agent.	he purpose of changing its registe	red office or register	red agent, or both, in the State of Florida.	ł am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and talle it applicable				DATE		
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00				000000837 93/05/08-800	834 97-001 500.00	
	A GENERAL PARTNER TH NOTE: General Partners MAY	AT IS A BUSINESS ENTITY NOT be changed on the for	MUST BE REGIS n; an amendmer	TERED AND ACTIVE WITH THIS On the must be filed to change a general	FFICE. al partner.	
12.	GENERAL PARTNER I	NFORMATION (*)	Company the Comp	The state of the s	"是我们的是一个人都是	
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NAME STREET ADDRESS	PRICE OF WINTER PARK, INC.	(family				
CITY-ST-ZIP	1009 GREENTREE DRIVE WINTER PARK, FL 32789					
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CITY-ST-ZIP DOCUMENT # STREET ADDRESS

CITY-ST-ZIP 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

Vice President SIGNATURE: A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #

IN THIS SPACE

CITY-SI-ZIP

DOCUMENT # NAME STREET ADDRESS

NAME

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS