

2008 LIMITED PARTNERSHIP ANNUAL REPORT**Due By May 1, 2008**FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY -1 AM 8:20

DOCUMENT # A960000024441. Entity Name
ZICHECK INVESTMENTS, LTD.Principal Place of Business
5570 SOUTH KENANSVILLE
YEEHAW JUNCTION, FL 34972Mailing Address
5570 SOUTH KENANSVILLE
YEEHAW JUNCTION, FL 34972

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02022008

Chg-LP

CR2E003 (12/06)

4. FEI Number

65-0724742

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZICHECK, BEVERLY
5570 SOUTH KENANSVILLE
YEEHAW JUNCTION, FL 34972

Name

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.

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 # P96000102351
NAME ZICHECK PROPERTIES OF FLORIDA, INC.
STREET ADDRESS 5570 SOUTH KENANSVILLE
CITY-ST-ZIP YEEHAW JUNCTION, FL 34972

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE