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

DO NOT WRITE IN THIS SPACE

DOCUMENT # A97000000020

1. Entity Name

KEN AND KAY FAMILY LIMITED PARTNERSHIP



FILED Feb 14, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2108 MORNINGSIDE ROAD AVON PARK, FL 33825 P.O. BOX 460 AVON PARK, FL 33826



01042008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0714442

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

HERNDON, KAY DAVIS 2108 MORNINGSIDE ROAD AVON PARK, FL 33825

STAPLE CHECK HERE

DO NOT WRITE IN THIS SPACE

AVON PARK, FL 33825		IN THIS SPACE
6. The above the obligation	named entity submits this statement for the purpose of changing its regions of registered agent.	I gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or or inted name of registered agent and title if applicable.	DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.0	
	NOTE: General Partners MAY NOT be changed on the	IY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	611383 D. M. D. GROVES, INC. 1139 LAKE REEDY BLVD., SOUTH FROSTPROOF, FL 338533384	, U00000828535 20 U00000828535
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	KENNETH, DAVIS A TRUSTEE 116 MAXCY LANE FROSTPROOF, FL 33843	02/26708-80006-004 500.00
DOCUMENT I NAME STREET ADDRESS CITY-ST-ZIP	DAVIS HERNDON, KATHERINE TRUSTEE 2108 MORNINGSIDE ROAD AVON PARK, FL 33825	DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
DOCUMENT / NAME STREET ADDRESS CHY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP		

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

MATINE AND THEN OR BUILTED NAME OF BLOWING GENERAL BARTHER

TB 12.08

(813)452-5953

Daytime Phone #