


**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008**

DOCUMENT # A97000000528			
1. Entity Name J & R FRANK INVESTMENTS, LTD.			
Principal Place of Business 3307 LIGHTHOUSE PT. LANE JACKSONVILLE FL 32250		Mailing Address 3307 LIGHTHOUSE PT. LANE JACKSONVILLE FL 32250	
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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 APR 23 AM 11:03



1st MOORE CR2E003 (10/07)

4. FEI Number 59-3434465		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRANK, JAMES R 3307 LIGHTHOUSE PT. LANE JACKSONVILLE FL 32250		7. Name and Address of New Registered Agent 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 _____		DATE 04/23/08--01017--006 **500.00	

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	FRANK, JAMES R	CITY-ST-ZIP	
STREET ADDRESS	3307 LIGHTHOUSE PT. LANE		
CITY-ST-ZIP	JACKSONVILLE FL 32250		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	FRANK, RUTH S	CITY-ST-ZIP	
STREET ADDRESS	3307 LIGHTHOUSE PT. LANE		
CITY-ST-ZIP	JACKSONVILLE FL 32250		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	FRANK, JAMES R JR.	CITY-ST-ZIP	
STREET ADDRESS	1211 12TH ST NORTH		
CITY-ST-ZIP	JACKSONVILLE FL 32250		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	FRANK, JOHN B	CITY-ST-ZIP	
STREET ADDRESS	7095 HOLLYWOOD BLVD., #544		
CITY-ST-ZIP	HOLLYWOOD CA 90028		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	FRANK, MARK S	CITY-ST-ZIP	
STREET ADDRESS	1012 RUTH STREET		
CITY-ST-ZIP	JACKSONVILLE FL 32250		
DOCUMENT #	NAME	STREET ADDRESS	
NAME		CITY-ST-ZIP	
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

SIGNATURE *James R Frank*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

904
4-808 821-9405
Date Daytime Phone

STAPLE CHECK HERE