


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 26, 2008 08:00 A
Secretary of State

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|---|---|
| DOCUMENT #A97000000547 1. Entity Name GRESHAM FAMILY PARTNERS, LTD. |  |
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| Principal Place of Business 1629 N.W. 24TH STREET GAINESVILLE, FL 32605 | Mailing Address 1629 N.W. 24TH STREET GAINESVILLE, FL 32605 |
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| DO NOT WRITE IN THIS SPACE |
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01032008 No Chg-LP CR2E003 (12/06)

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| 4. FEI Number 59-3456542 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent GRESHAM, WILLIAM MARVIN 1629 N.W. 24TH STREET GAINESVILLE, FL 32605 |
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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.

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| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> | DATE _____ |
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| FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 |
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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 | |
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| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | WILLIAM MARVIN GRESHAM, TRUSTEE 1629 N.W. 24TH STREET GAINESVILLE, FL 32605 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | PEGGY WRAY GRESHAM, TRUSTEE 1629 N.W. 24TH STREET GAINESVILLE, FL 32605 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | |
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| <p>U00000840367 03/06/08-80047-001 500.00</p> <p>DO NOT WRITE IN THIS SPACE</p> |
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STAPLE CHECK HERE

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

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|--|---------------------------------------|------------------------------------|
| SIGNATURE: <u>William Marvin Gresham</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | <u>2/24/08</u> <small>Date</small> | <small>Daytime Phone #</small> |
|--|---------------------------------------|------------------------------------|