


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

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # A97000001871 1. Entity Name TRINITY HERITAGE ENTERPRISES, LTD.	
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Principal Place of Business 4717 DOLPHIN CAY, APT. A-508 ST. PETERSBURG FL 33711	Mailing Address 4717 DOLPHIN CAY, APT. A-508 ST. PETERSBURG FL 33711
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E003 (10/07)

4. FEI Number 59-3463357		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent KNEEBUSCH, CARL W 4717 DOLPHIN CAY, APT. A-508 ST. PETERSBURG FL 33711		

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 _____
Signature, typed or printed name of registered agent and fee if applicable

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 #	KNEEBUSCH, CARL W 4717 DOLPHIN CAY, APT. A-508 ST. PETERSBURG FL 33711	STREET ADDRESS	
NAME			
CITY-ST-ZIP			
DOCUMENT #	KNEEBUSCH, STEVEN C 4717 DOLPHIN CAY, APT. A-508 ST. PETERSBURG FL 33711	STREET ADDRESS	000000802548 02/04/08-80005-006 500.00
NAME			
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DOCUMENT #		STREET ADDRESS	
NAME			
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:  **CARL W. KNEEBUSCH** 1/26/08 727-906-0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE