

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A97000002549

1. Entity Name
O & E PARTNERS, LTD.



FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 25 AM 10:43

Principal Place of Business
**3500 N.W. 97 BLVD A
 GAINESVILLE, FL 32606**

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
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SONTAG, SANDRA H 3700 N.W. 91ST ST., A-100 GAINESVILLE, FL 32606		Name SONTAG, SANDRA H. Street Address (P.O. Box Number is Not Acceptable) 3500 NW 97 BLVD, SUITE A City GAINESVILLE FL Zip Code 32606	
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 SANDRA H. SONTAG		DATE 4/21/08	
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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P96000024406	STREET ADDRESS	
NAME	OAK GLADE APARTMENTS, INC.	CITY-ST-ZIP	04/24/08-01044-014 **500.00
STREET ADDRESS	3700 N.W. 91ST STREET, A-100		
CITY-ST-ZIP	GAINESVILLE, FL 32606		
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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: OSCAR E. HAUFER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Oscar Haufner

4/21/08

352-331-3396

Date

Daytime Phone #

STAPLE CHECK HERE