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

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DUE BY MAY 1, 2008 FILED Feb 28, 2008 08:00 AM Secretary of State DOCUMENT # A9800000024 JAMERSON PROPERTIES, LTD. Mailing Address Principal Place of Business 2517-B EAST COLONIAL DRIVE 2517-B EAST COLONIAL DRIVE ORLANDO FL 32803 ORLANDO FL 32803 2. Principal Place of Business - No P.O. Bex # 3. Mailing Address Scite, Apt. #, etc. Suite. Apl. #. etc. 1st MOORE CR2E003 (10/07) City & State Applied For City & State 4. FEI Number 59-3486231 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JAMERSONS, HOMER B 2517-B EAST COLONIAL DRIVE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32803 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, typed or printed name of registroon agent and the 4 applicable DATE 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 ADDRESS CHANGES ONLY 13. P98000000171 DOCUMENT # STREET ADDRESS JAMERSON INVESTMENTS CORP. STREET ADDRESS 2517-B EAST COLONIAL DRIVE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ACCIPESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS MALAS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET AUDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZiP **COCUMENT** STREET ADDRESS NAME STREET ADDRESS CITY+ST-ZIF CITY-ST ZIP

SIGNATURE: Homer B. Jamerson Feb. 25, 2008 407.894.7821

14. Thereby 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 path; 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.