## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

SECRETARY OF STATE **DOCUMENT # A98000001058** TALLAHASSEE, FLORIDA 1. Entity Name KSIR, LTD. 08 APR | | AM | |: 34 Principal Place of Business Mailing Address 7220 FINANCIAL WAY, SUITE 400 7220 FINANCIAL WAY, SUITE 400 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 03192008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3510227 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALLEN, LAURA HENRY DO NOT WRITE 7220 FINANCIAL WAY, SUITE 400 JACKSONVILLE, FL 32256 IN THIS SPACE 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. 000123023450 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 GENERAL PARTNER INFORMATION 12. P98000038980 DOCUMENT # KSIR. INC. NAME 7220 FINANCIAL WAY, SUITE 400 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32256 DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP DØ NOT WRITE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP E IN THIS SPACE DOCHMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUM**E**IT #

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:

STREET ADDRESS CITY-ST-ZIP