## **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

## **FILED Due By May 1, 2008** Mar 13, 2008 08:00 AM **DOCUMENT # A98000001503 Secretary of State** THOMAS LINDSEY LIMITED PARTNERSHIP Principal Place of Business Mailing Address 1518 EAST LAKE DRIVE P.O. BOX 460325 FORT LAUDERDALE, FL 33316 FT. LAUDERDALE, FL 33346 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 03072008 Chg-LP CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 59-3516982 Not Applicable Zip Country Country Zip \$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 Name LINDSEY HOLDINGS, INC. Street Address (P.O. Box Number is Not Acceptable) 1518 EAST LAKE DRIVE FORT LAUDERDALE, FL 33316 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. Signeture, typed or printed name of registered agent and site if applicable. DATE FILE NOW!!! FEE 18 \$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 ADDRESS CHANGES ONLY 13. DOCUMENT # P98000050549 STREET ADDRESS NAME LINDSEY HOLDINGS, INC. STREET ADORESS 1518 EAST LAKE DRIVE City-St-ZIP CITY-ST-ZIP *U00000*857893 FORT LAUDERDALE, FL 33316 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

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

CITY-ST-ZIP

CITY-ST-7IP

SIGNATURE: Thirdgey for Lindsey Holdings TI