

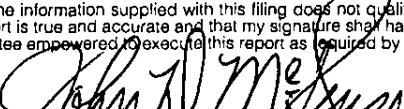


FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # A98000001933			
1. Entity Name MCKENZIE PROPERTIES, LIMITED			
Principal Place of Business 6500 CAROLINE STREET MILTON, FL 32570		Mailing Address 6500 CAROLINE STREET MILTON, FL 32570	
DO NOT WRITE IN THIS SPACE			
		02042008 No Chg-LP CR2E003 (12/06)	
		4. FEI Number 59-3533376	
		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 MCKENZIE, JOHN D 6500 CAROLINE STREET MILTON, FL 32570		DO NOT WRITE 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.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		110000082-011 500.00 03/05/08-80062-011 500.00	
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		DO NOT WRITE IN THIS SPACE	
DOCUMENT #			
NAME	MCKENZIE, JOHN D		
STREET ADDRESS	6500 CAROLINE STREET		
CITY - ST - ZIP	MILTON, FL 32570		
DOCUMENT #			
NAME	MCKENZIE, MARY T		
STREET ADDRESS	6500 CAROLINE STREET		
CITY - ST - ZIP	MILTON, FL 32570		
DOCUMENT #			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #			
NAME			
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:  (John D. McKenzie)		2-1-08 (850) 623-3481	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<small>Date Daytime Phone #</small>	