

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 14, 2008 08:00 AM
Secretary of State

DOCUMENT # A98000002195

1. Entity Name
FLORIDA LITHOLOGY, LTD.



Principal Place of Business

14255 US HIGHWAY 1
SUITE 231
JUNO BEACH, FL 33408

Mailing Address

14255 US HIGHWAY 1
SUITE 231
JUNO BEACH, FL 33408



DO NOT WRITE IN THIS SPACE

02112008 No Chg-LP

CR2E003 (12/06)

4. FEI Number

65-0867183

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NORMENT, ANTHONY E
1905 MAINSAIL CIRCLE
JUPITER, FL 33477

**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

Signature, typed or printed name of registered agent and title if applicable

DATE

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

DOCUMENT # P01000121314
NAME FLORIDA LITHOLOGY NO. 1, INC.
STREET ADDRESS 14255 U.S. HIGHWAY 1, SUITE 231
CITY-ST-ZIP JUNO BEACH, FL 33408

DOCUMENT # P01000121319
NAME FLORIDA LITHOLOGY NO. 2, INC.
STREET ADDRESS 14255 U.S. HIGHWAY 1, SUITE 231
CITY-ST-ZIP JUNO BEACH, FL 33408

DOCUMENT # P01000121322
NAME FLORIDA LITHOLOGY NO. 2, INC.
STREET ADDRESS 14255 U.S. HIGHWAY 1, SUITE 231
CITY-ST-ZIP JUNO BEACH, FL 33408

DOCUMENT # P98000079810
NAME FLORIDA LITHOLOGY MANAGEMENT, INC.
STREET ADDRESS 14255 U.S. HIGHWAY 1, SUITE 231
CITY-ST-ZIP JUNO BEACH, FL 33408

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000828587
02/26/08-80007-010 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

ANTHONY NORMENT

02/10/08 561-630-9022

Date

Daytime Phone #