


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 02, 2008 08:00 AM
Secretary of State

DOCUMENT # A99000000043 1. Entity Name HIGH NET INVESTORS, LIMITED	
---	---

Principal Place of Business 1801 SOUTH FEDERAL HIGHWAY, SUITE 300 DELRAY BEACH, FL 33843	Mailing Address 1801 SOUTH FEDERAL HIGHWAY, SUITE 300 DELRAY BEACH, FL 33843
--	--



02272008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0876258	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BASCHKOFF, ERIC 1801 SOUTH FEDERAL HIGHWAY, SUITE 300 DELRAY BEACH, FL 33843

**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>	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 # NAME STREET ADDRESS CITY - ST - ZIP	V73487 CHAMPION COMMUNICATIONS, INC. 1801 SOUTH FEDERAL HIGHWAY, SUITE 300 DELRAY BEACH, FL 33843
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	

U000000878635
04/14/08-80062-012 500.00

**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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	Date 3/31/08	Daytime Phone # 561-272-5667
---	-----------------	---------------------------------