

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

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

DOCUMENT # A99000001685

1. Entity Name
SANDIFER PARTNERSHIP, LTD.



Principal Place of Business
2145 DENNIS STREET
JACKSONVILLE, FL 32204

Mailing Address
2145 DENNIS STREET
JACKSONVILLE, FL 32204



01082008 No Chg-LP

CR2E003 (12/08)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3603382

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

SANDIFER, MICHAEL A
2145 DENNIS STREET
JACKSONVILLE, FL 32204

**DO NOT WRITE
IN THIS SPACE**

9. 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 fee 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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P99000087683
NAME SANDIFER ENTERPRISES, INC.
STREET ADDRESS 2145 DENNIS STREET
CITY- ST- ZIP JACKSONVILLE, FL 32204

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CITY- ST- ZIP

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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

Date

Expiring Period

STAPLE CHECK HERE

1/9/08

904-798-1009