2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 07, 2008 08:00 All Secretary of State **DOCUMENT # A99000001836** CHARLES FAMILY PARTNERSHIP, LTD. Principal Place of Business Mailing Address 2306 NEBRASKA AVE. 2306 NEBRASKA AVE. FT. PIERCE, FL 34950 FT. PIERCE, FL 34950 2. Principal Place of Business - No PO Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt # etc. 03212008 Chg-LP CR2F003 (12/06) Applied For 4 FEI Number City & State City & State 65-0951819 Not Applicable Ζıp Country Country \$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 CHARLES, JOSEPH T Street Address (P.O. Box Number is Not Acceptable) 2306 NEBRASKA AVE. FT. PIERCE, FL 34950 City 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. spirating, typergiocy i mydramia of regererod ward untilto i applicable CATE 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 13. DOCIEMEST A STREET ADDRESS NAME CHARLES INVESTMENT MANAGEMENT, L.C. STREET SEOPESS 4300 NE JOES POINT RD CHY-ST-ZIP CdY-Si-7F STUART, FL 34996 DOMESTA SERVET LABORESS NAME STREET 45 ORESS CIY SI-ZIP OTH STOP DOCUMENTA STREET ADDRESS. DAME STRICT MORES OTY-SCORE CHY SI DE DOCUMENT & STREET ADDRESS NAME STREET ADORESS City-St-7P 001Y-31-7E podusani v CROSS TRUES STREET ADDRESS CTY-ST- DP 0011-51-79 POCHATIA STREET ADDRESS KAM CHRIST A CRESS

CITY OF ZIP

SIGNATURE:

607-51-76

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I turther certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under outh: that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 320, Florida Statutes

LL I O O