

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A99000001958

1. Entity Name
 SUTTON FAMILY LIMITED PARTNERSHIP



FILED

08 FEB -8 PM 3:23

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business

303 E. LEMON ST.
 LAKE LAND, FL 33801

Mailing Address

PO BOX 9
 LAKE LAND, FL 33802

2. Principal Place of Business - No P.O. Box #
 4223 South Pipkin Rd.

3. Mailing Address

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

City & State

LAKE LAND, FL

City & State

Zip

33811

Country

USA

Zip

Country

02012008

Chg-LP

CR2E003 (12/06)

4. FEI Number

59-3614266

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SUTTON, CARLOS K
 5824 GOVEVIEW DRIVE
 LAKE LAND, FL 33813

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

4223 South Pipkin Rd.

Suite 200

City

LAKE LAND

FL

Zip Code

33811

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

Carlos Keith Sutton Jr.

2/4/2008

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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

SUTTON, CARLOS K

303 E. LEMON ST.

LAKE LAND, FL 33801

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

4223 South Pipkin Rd. Suite 200

LAKE LAND, FL 33811

STREET ADDRESS

CITY - ST - ZIP

4223 South Pipkin Rd. Suite 200

LAKE LAND, FL 33811

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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:

Carlos Keith Sutton Jr.

2/4/2008

863-683-5565

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

Daytime Phone #

STAPLE CHECK HERE