


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A99000002194			
1. Entity Name RICHEY FAMILY LIMITED PARTNERSHIP			
Principal Place of Business 2394 WEST BAYSHORE ROAD GULF BREEZE, FL 32563		Mailing Address 2394 WEST BAYSHORE ROAD GULF BREEZE, FL 32563	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01112008 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
RICHEY, MINNIE K 2394 WEST BAYSHORE ROAD GULF BREEZE, FL 32563		Name Rhonda Britt Street Address (P.O. Box Number is Not Acceptable) 2554 Mary Fox Drive City Gulf Breeze FL Zip Code 32563	

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: Rhonda R. Britt Rhonda R. Britt

Feb. 5, 2008
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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
	RICHEY, MINNIE K	CITY - ST - ZIP	
	2394 WEST BAYSHORE ROAD		
	GULF BREEZE, FL 32563		
DOCUMENT #	NAME	STREET ADDRESS	
		CITY - ST - ZIP	
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		CITY - ST - ZIP	
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DOCUMENT #	NAME	STREET ADDRESS	
		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: Rhonda R. Britt Rhonda Britt

Jan 22 2008 x8509329747
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE