

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B01000000350

FILED
Mar 26, 2009
Secretary of State

Entity Name: GRAHAM SOUTH FLORIDA MEDICAL BUILDING LIMITED PARTNERSHIP

Current Principal Place of Business:

505 5TH AVENUE
SUITE 200
DES MOINES, IA 503092449 US

New Principal Place of Business:

Current Mailing Address:

505 5TH AVENUE
SUITE 200
DES MOINES, IA 503092449 US

New Mailing Address:

FEI Number: 42-1524801 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

GENERAL PARTNER INFORMATION:

Document #: F00000004686
Name: THE GRAHAM GROUP OF IOWA, INC.
Address: 505 5TH AVENUE, SUITE 200
City-St-Zip: DES MOINES, IA 50309

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CHARLES R. TAYLOR

_____ Electronic Signature of Signing General Partner

SEC.

03/26/2009

_____ Date