



2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # B04000000520 1. Entity Name JAS FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business 601 OAK COMMONS BLVD. KISSIMMEE, FL 34741	Mailing Address 601 OAK COMMONS BLVD. KISSIMMEE, FL 34741
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DO NOT WRITE IN THIS SPACE

	
01052008 No Chg-LP	CR2E003 (12/06)
4. FEI Number 59-3425737	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MASSEY, JOHNSON P M.D. 601 OAK COMMONS BLVD. KISSIMMEE, FL 34741

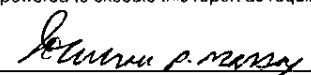
DO NOT WRITE IN THIS SPACE

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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	000000798550 01/30/08-80033-005 500.00
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	MASSEY, JOHNSON P TRUSTEE 9848 KILGORE ROAD ORLANDO, FL 32836
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MASSEY, MUSSARAT J TRUSTEE 9848 KILGORE ROAD ORLANDO, FL 32836
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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:  JOHNSON P. MASSEY 1-25-08 407 846-0624 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #</small>

STAPLE CHECK HERE