


**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # B94000000510</b> 1. Entity Name <b>THE DONALD E. GUNDERSON FAMILY LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>3553 BAYARD DRIVE CINCINNATI, OH 45208</b>	Mailing Address <b>3553 BAYARD DRIVE CINCINNATI, OH 45208</b>
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**DO NOT WRITE IN THIS SPACE**



01092008 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>31-1424098</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>MAINE, JEFF 400 NORTH ASHLEY, SUITE 2300 TAMPA, FL 33602</b>
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00</b>
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**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	<b>GUNDERSON, DONALD E 3553 BAYARD DRIVE CINCINNATI, OH 45208</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>GUNDERSON, MARY JEAN 3553 BAYARD DRIVE CINCINNATI, OH 45208</b>
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**DO NOT WRITE IN THIS SPACE**

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01/16/08-80055-009 500.00

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

<b>SIGNATURE: DONALD E GUNDERSON</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<i>Donald E Gunderson</i> <small>Date</small>	<b>1/10/08</b> <small>Daytime Phone #</small>	<b>(772) 229-2057</b> <b>(513) 321-8824</b>
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