2008 LIMITED PARTNERSHIP ANNUAL REPORT

Apr 14, 2008 08:00 A Secretary of State Due By May 1, 2008 **DOCUMENT # B95000000177** LUC LAKE HANCOCK LIMITED PARTNERSHIP Principal Place of Business Mailing Address **BOX 460** BOX 460 300 GREENBRIER ROAD 300 GREENBRIER ROAD SUMMERSVILLE, WV 26651 SUMMERSVILLE, WV 26651 01072008 No Chg-LP CR2E003 (12/06) 4. FEI Number Applied For 55-0711558 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROEDER, LOUIS 111 DO NOT WRITE 7414 SPARKLING LAKE ROAD ORLANDO, FL 32819 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, typed or printed name of registered agent and title if applicable. 0000000897860 FILE NOW!!! FEE IS \$500.00 04/25/08-80064-014 500.00 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 F95000002438 DOCUMENT # NAME LAND USE CORPORATION STREET ADDRESS BOX 460, 200 GREENBRIER ROAD CITY-ST-ZIP SUMMERSVILLE, WV 26651 DOCUMENT # NAME STREET ÁDORESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-\$1-ZIP IN THIS SPACE DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT

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 empoyal red to execute this report as required by Chapter 620. Florida Statutes

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED