


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

**FILED
Apr 28, 2008 08:00 AM
Secretary of State**

DOCUMENT # A0100000120 1. Entity Name DAVID MILLARD ENTERPRISES LIMITED PARTNERSHIP	
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Principal Place of Business C/O MORRIS ENGLEBERG, ESQ. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021	Mailing Address C/O MORRIS ENGLEBERG, ESQ. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021
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04092008 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-1070482	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ENGELBERG, MORRIS ESQ. 4040 SHERIDAN STREET HOLLYWOOD, FL 33021
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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	
DOCUMENT #	P01000008418
NAME	DAVID MILLARD ENTERPRISES, INC.
STREET ADDRESS	4040 SHERIDAN STREET
CITY-ST-ZIP	HOLLYWOOD, FL 33021
DOCUMENT #	
NAME	
STREET ADDRESS	
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000000930602
05/21/08-80115-010 500.00

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

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: *D.R. Millard*, President of GP 4/16/08 713.210.4368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #