

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 14, 2007**

**DOCUMENT # A02000001555**

1. Entity Name  
**2740 PROFESSIONAL BUILDING REAL ESTATE LIMITED  
LIABILITY LIMITED PARTNERSHIP**



Principal Place of Business  
**2740 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**

Mailing Address  
**2740 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**

FILED  
07 JUN -1 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05232007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1858219**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**GRAGG, K. LAWRENCE  
WHITE & CASE LLP  
200 S. BISCAYNE BOULEVARD STE. 4900  
MIAMI, FL 33131**

**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

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$900.00  
On or after September 14, 2007, Fee will be \$1000.00**

**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  
**DUFFNER, LEE R  
2740 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SANDBERG, JOEL S  
2740 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**WINN, SAMUEL M  
2740 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**600104227686  
06/11/07--01054--015 \*\*900.00**

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

*[Signature]* **Lee R. Duffner** 23 May 7 (954) 25 2740