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

FILED Apr 08, 2008 08:00 A Secretary of State

DOCUMENT # A0400000437  1. Entity Name SBB PARTNERS, LLLP		
Principal Place of Business	Mailing Address	1
2300 GLADES RD, STE 100E BOCA RATON, FL 33431	2300 GLADES RD, STE 100E BOCA RATON, FL 33431	



## DO NOT WRITE IN THIS SPACE

01282008 No Chg-LP CR2E003 (12/06)

4. FEI Number Applied For 27-0083625 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

SBB EQUITY, LLC 2300 GLADES RD, STE 100E

## DO NOT WRITE

BOCA RATON, FL 33431	IN THIS SPACE	
<ol><li>The above named entity submits this statement for the purpose of changing its registered agent.</li></ol>	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature: typed or printed name of registered agent and title if applicable	DATE	
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 # L04000020372  SAME SIREEI ADDRESS CITY-ST-ZIP BOCA RATON, FL 33431	U00000886740	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	04/18/08-80069-018 500.00	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-SI-ZIP	e exemptions contained in Chapter 119. Florida Statutes. I further certify that the information	

I nereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I liditief 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:

OR PRINTED NAME OF SIGNING GENERAL PARTNER

William R. Greenfield

561-392-6662