


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
Jan 29, 2007 08:00 AM
Secretary of State**

DOCUMENT # A25151
1. Entity Name
KOFFLER ASSOCIATES LIMITED PARTNERSHIP



Principal Place of Business: ONE PROVIDENCE WASHINGTON PL., NINTH FLOOR PROVIDENCE, RI 02903
Mailing Address: ONE PROVIDENCE WASHINGTON PL., NINTH FLOOR PROVIDENCE, RI 02903

DO NOT WRITE IN THIS SPACE

01132007 No Chg-LP CR2E003 (12/06)
4. FEI Number: 05-0426869 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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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, 2007, 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 #	
NAME	KOFFLER, LILLIAN TRUSTEE
STREET ADDRESS	4920 LORING DRIVE #1517
CITY- ST- ZIP	WEST PALM BEACH, FL 33417
DOCUMENT #	
NAME	BORNSTEIN, SANDRA K TRUSTEE
STREET ADDRESS	4920 LORING DRIVE #1517
CITY- ST- ZIP	WEST PALM BEACH, FL 33417
DOCUMENT #	
NAME	BORNSTEIN, RICHARD J TRUSTEE
STREET ADDRESS	4920 LORING DRIVE #1517
CITY- ST- ZIP	WEST PALM BEACH, FL 33417
DOCUMENT #	
NAME	PASTER, BENJAMIN G TRUSTEE
STREET ADDRESS	4920 LORING DRIVE #1517
CITY- ST- ZIP	WEST PALM BEACH, FL 33417
DOCUMENT #	
NAME	KOFFLER, LILLIAN INDVLD.
STREET ADDRESS	4920 LORING DRIVE #1517
CITY- ST- ZIP	WEST PALM BEACH, FL 33417
DOCUMENT #	
NAME	BORNSTEIN, RICHARD INDVLD.
STREET ADDRESS	2 SOANS CURVE DRIVE
CITY- ST- ZIP	PALM BEACH, FL

U00000606529
01/31/07-00001-002 500.00

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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: *Richard J Bornstein* **1-23-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE