


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

**FILED**  
**Jan 11, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # A29687**  
 1. Entity Name  
**THE RICHARD L. FEIN FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
 11408 OHANA CIR.  
 BOYNTON BEACH, FL 33437

Mailing Address  
 11408 OHANA CIR.  
 BOYNTON BEACH, FL 33437

**DO NOT WRITE IN THIS SPACE**



01032007 No Chg-LP CR2E003 (12/06)

4. FEI Number <b>65-0189732</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

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

**FRANK J. RIEF, III**  
**RIEF & STRAS**  
**442 W. KENNEDY BLVD., SUITE 340**  
**TAMPA, FL 33606**

**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, 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	FEIN, RICHARD L.
STREET ADDRESS	11408 OHANA CIRCLE
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000582075  
 01/11/07-80017-018 500.00

**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:** Richard L Fein **11/4/07** **561-7389736**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #