

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

**FILED**

**Mar 13, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A98000000237**

1. Entity Name  
**PHILIP ZIEKY PARTNERSHIP, LTD.**



Principal Place of Business  
**C/O PHILIP ZIEKY  
715 PINE LAKE DRIVE  
DELRAY BEACH, FL 33445**

Mailing Address  
**C/O PHILIP ZIEKY  
715 PINE LAKE DRIVE  
DELRAY BEACH, FL 33445**



01262008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**65-0810525**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

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

**ZIEKY, PHILIP  
715 PINE LAKE DRIVE  
DELRAY BEACH, FL 33445**

**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 \$500.00**  
**After May 1, 2008, Fee will be \$900.00**

000000857906  
04/01/08-80023-007 500.00

**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  
**ZIEKY, PHILIP  
715 PINE LAKE DRIVE  
DELRAY BEACH, FL 33445**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ZIEKY, ELIOTT S  
41 MEEKS POINT ROAD  
EAST HAMPTON, CT 064241525**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ZIEKY, JEFFREY M  
P.O. BOX 2478  
CAREFREE, AZ 853772478**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Philip Zieky* **E/10th S Zieky**

**2/15/08**

**860 289 3474**