


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 23 AM 11:04

DOCUMENT # A98000000848

1. Entity Name
 4227 ENTERPRISE AVENUE, LTD.



Principal Place of Business 4251 LAKE FOREST DRIVE #214 BONITA SPRINGS, FL 34134	Mailing Address 4251 LAKE FOREST DRIVE #214 BONITA SPRINGS, FL 34134
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2. Principal Place of Business - No P.O. Box # 1011 Touhy Ave.	3. Mailing Address 1011 Touhy Ave.
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Suite, Apt. #, etc. #290	Suite, Apt. #, etc. #290
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02202008 Chg-LP CR2E003 (12/06)

City & State Des Plaines, IL	City & State Des Plaines, IL
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4. FEI Number 65-0845489	Applied For Not Applicable
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Zip 60018	Country USA	Zip 60018	Country USA
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

BURKE, WILLIAM M ESQ.
 C/O BOND, SCHOENECK & KING, P.A.
 1167 THIRD STREET SOUTH, SUITE 107
 NAPLES, FL 34102

7. Name and Address of New Registered Agent

Name
William M. Burke, Esq.

Street Address (P.O. Box Number is Not Acceptable)
c/o Goodlette, Coleman, Johnson, et. al

4001 Tamiami Trail North, Suite 300

City **Naples** FL Zip Code **34103**

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 *William M. Burke* DATE *2/2/08*

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 #	P98000030534
NAME	4227 ENTERPRISE AVENUE, INC.
STREET ADDRESS	4251 LAKE FOREST DRIVE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	1011 Touhy Ave. #290
CITY-ST-ZIP	Des Plaines, IL 60018
STREET ADDRESS	200125023302
CITY-ST-ZIP	04/22/08--01017--010 **500.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Kevin J. Tobin* Kevin J. Tobin DATE: *4/17/08* 312-924-4200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER DATE Daytime Phone #

STAPLE CHECK HERE