


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

SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

08 MAY -9 PM 1:37

**DOCUMENT # B98000000069**

1. Entity Name  
**THE BREEN FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**3524 FAIR OAKS LANE  
 LONGBOAT KEY, FL 34228**

Mailing Address  
**3960 MERRICK RD.  
 SEAFORD, NY 11783**

2. Principal Place of Business - No P.O. Box #  
**9 Avenue of the Flowers**

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
**Longboat Key FL**

City & State  
 Suite, Apt. #, etc.

Zip  
**34228** Country  
**USA**

Zip Country

  
 03/26/08 01003 004 \$ 500  
 05012008 Chg-LP CR2E003 (12/06)

4. FEI Number  
**58-2260831** Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BREEN, JAMES J  
 3524 FAIR OAKS LANE  
 LONGBOAT KEY, FL 34228**

7. Name and Address of New Registered Agent

Name  
**James J. Breen**

Street Address (P.O. Box Number is Not Acceptable)  
**9 Avenue of the Flowers**

**PMB 115**

City  
**Longboat Key FL** Zip Code  
**34228**

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 *James J. Breen* **JAMES J. BREEN** DATE **5/5/2008**

Signature, typed or printed name of registered agent and title if applicable.

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	BREEN, JAMES J	STREET ADDRESS	9 Avenue of the Flowers - PMB 115
NAME	3524 FAIR OAKS LANE	CITY - ST - ZIP	Longboat Key, FL 34228
STREET ADDRESS	LONGBOAT KEY, FL 34228	STREET ADDRESS	9 Avenue of the Flowers - PMB 115
CITY - ST - ZIP		CITY - ST - ZIP	Longboat Key, FL 34228
DOCUMENT #	BREEN, JOAN F	STREET ADDRESS	
NAME	3524 FAIR OAKS LANE	CITY - ST - ZIP	
STREET ADDRESS	LONGBOAT KEY, FL 34228	STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	

*[Handwritten signature]*

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: *James J. Breen* **JAMES J. BREEN** DATE **5/5/2008**

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