

2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000001106

FILED
Jan 05, 2010
Secretary of State

Entity Name: LEE S. LASSER FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

4100 NORTH POWERLINE ROAD, SUITE B-2
POMPANO BEACH, FL 33073

New Principal Place of Business:

Current Mailing Address:

4100 NORTH POWERLINE ROAD, SUITE B-2
POMPANO BEACH, FL 33073

New Mailing Address:

FEI Number: 65-1022787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASSER, LEE S
4100 NORTH POWERLINE ROAD, SUITE B-2
POMPANO BEACH, FL 33073 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: LASSER, LEE S TRUSTEE
Address: 4100 NORTH POWERLINE ROAD, SUITE B-2
City-St-Zip: POMPANO BEACH, FL 33073

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Document #:

Name: LOUIS, ROBIN E TRUSTEE
Address: 4100 NORTH POWERLINE ROAD, SUITE B-2
City-St-Zip: POMPANO BEACH, FL 33073

Address:
City-St-Zip:

Document #:

Name: LASSER, DAVID A TRUSTEE
Address: 4100 NORTH POWERLINE ROAD, SUITE B-2
City-St-Zip: POMPANO BEACH, FL 33073

Address:
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: LEE LASSER

PART

01/05/2010

Electronic Signature of Signing General Partner

Date