

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

**FILED**  
**Jan 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000001108**

1. Entity Name

EMPIRE FLORIDA PROPERTIES, LTD.



Principal Place of Business

18856 S.E. RED APPLE LANE  
JUPITER, FL 33458

Mailing Address

18856 S.E. RED APPLE LANE  
JUPITER, FL 33458



01112008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-1024097

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

CFRA, LLC  
CORPORATE CENTER THREE AT INT'L PLAZA  
4221 W. BOY SCOUT BLVD, 10TH FLOOR  
TAMPA, FL 33607-5736

**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

000000789727  
01/23/08-80005-003 500.00

**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 # P00000066923  
NAME EMPIRE FLORIDA MANAGEMENT, INC.  
STREET ADDRESS 18856 S.E. RED APPLE LANE  
CITY-ST-ZIP JUPITER, FL 33458

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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

1/15/08

561-743-0108

STAPLE CHECK HERE