

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 22, 2008 08:00 AM
Secretary of State

DOCUMENT # A00000001501

1. Entity Name
UNIVERSITY COMMONS OFFICE CENTER, LTD.



Principal Place of Business
1900 W. COMMERCIAL BLVD., STE 200
FT LAUDERDALE, FL 33309

Mailing Address
1900 W. COMMERCIAL BLVD., STE 200
FT LAUDERDALE, FL 33309



03112008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1041141

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J
500 EAST BROWARD BLVD., STE 1950
FORT LAUDERDALE, FL 33394

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

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 # **P00000082067**
NAME **KEENAN SARASOTA, INC.**
STREET ADDRESS **1900 W. COMMERCIAL BLVD., STE 200**
CITY- ST- ZIP **FORT LAUDERDALE, FL 33309**

DOCUMENT # **P00000085683**
NAME **KEISER SARASOTA, INC.**
STREET ADDRESS **1900 W. COMMERCIAL BLVD. SUITE 175**
CITY- ST- ZIP **FT LAUDERDALE, FL 33309**

DOCUMENT #
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CITY- ST- ZIP

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U000000914369
05/08/08-80054-013 500.00

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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

UNIVERSITY COMMONS OFFICE CENTER, LTD.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

March 31, 2008

(954) 776-6700

Date

Daytime Phone #

STAPLE CHECK HERE