

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

**FILED**  
**Mar 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # A00000001687**

1. Entity Name  
1150 TECHPARTNERS, LTD.



Principal Place of Business  
2200 CENTREPARK W. DR., #100  
WEST PALM BEACH, FL 33409

Mailing Address  
2200 CENTRE PARK WEST DRIVE  
#100  
WEST PALM BEACH, FL 33409



01092008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1050722

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

HEDRICK, DALE  
2200 CENTRE PARK WEST DRIVE, #100  
WEST PALM BEACH, FL 33409

**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 # P00000048683  
NAME CORNERSTONE GENERAL PARTNER, INC.  
STREET ADDRESS 2200 CENTRE PARK WEST DRIVE, #100  
CITY-ST-ZIP WEST PALM BEACH, FL 33409

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U000000866600  
04/08/08-80035-023 500.00

**DO NOT WRITE  
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

DALE HEDRICK

Date

Daytime Phone #

1/9/08 561-689-8880

STAPLE CHECK HERE