


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

<b>DOCUMENT # A00000001702</b> 1. Entity Name KOHN ENTERPRISES, LTD., LLLP		
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**FILED**  
 08 FEB 21 PM 4:09  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business 1520 ROYAL PALM SQUARE BOULEVARD, STE 320 FORT MYERS, FL 33919	Mailing Address 431 SUWANEE PARK FOREST, IL 60466
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2. Principal Place of Business - No P.O. Box # 1380 ROYAL PALM Sq. Blvd	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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01062008 Chg-LP CR2E003 (12/06)

4. FEI Number 58-2584114	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  SCHOENFELD, LOWELL 1380 ROYAL PALM SQUARE BOULEVARD FORT MYERS, FL 33919	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
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 #	KOHN, MARILYN J TRUSTEE 431 SUWANEE PARK FOREST, IL 60466	STREET ADDRESS	900118315359 02/19/08--01026--014 **\$00.00
NAME		CITY-ST-ZIP	
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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:** Marilyn J. Kohn Marilyn J. Kohn 02/15/08 748-3666  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #