

**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)**  
**DUE BY MAY 1, 2008**

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000001877**

1. Entity Name

INDUSTRIAL DEVELOPMENT CO., LLLP



Principal Place of Business

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

Mailing Address

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



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E003 (10/07)

4. FEI Number

38-6313271

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 date if applicable

DATE

**FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2008, fee will be \$900. \*\*\* Make check payable to Florida Department of State.**

**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 #	FERRERA, MICHELE TRUSTEE
NAME	6601 LYONS ROAD, SUITE C-1
STREET ADDRESS	COCONUT CREEK FL 33073
CITY-ST-ZIP	
DOCUMENT #	FERRERA, MICHAEL J TRUSTEE
NAME	6601 LYONS ROAD, SUITE C-1
STREET ADDRESS	COCONUT CREEK FL 33073
CITY-ST-ZIP	
DOCUMENT #	FERRERA, AUGUSTINE TRUSTEE
NAME	6601 LYONS ROAD, SUITE C-1
STREET ADDRESS	COCONUT CREEK FL 33073
CITY-ST-ZIP	
DOCUMENT #	LASSER, LEE S TRUSTEE
NAME	4100 NORTH POWERLINE ROAD, SUITE B-2
STREET ADDRESS	POMPANO BEACH FL 33073
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	000000830142
CITY-ST-ZIP	02/26/08-80071-021 500.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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:

*Lee S. Lasser*

LEE S LASSER

2/12/08 (954) 975-0055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone

STAPLE CHECK HERE