

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

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000002001**

1. Entity Name  
**WINTER HAVEN-ARBOURS LIMITED PARTNERSHIP**



Principal Place of Business  
**660 LASALLE PLACE, UNIT 2 C  
HIGHLAND PARK, IL 60035**

Mailing Address  
**660 LASALLE PLACE, UNIT 2 C  
HIGHLAND PARK, IL 60035**



03202008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**36-4397574**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

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

**MARGOLIES, MARVIN H  
6720 PALERMO WAY  
LAKE WORTH, FL 33467**

**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

U000000875586  
04/11/08 80043 000 500.00  
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 # **P00000099371**  
NAME **DASE, INC.**  
STREET ADDRESS **660 LASALLE PLACE, UNIT 2 C**  
CITY-ST-ZIP **HIGHLAND PARK, IL 60035**

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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

3/28/08

Date

847-926 4422

Daytime Phone #

STAPLE CHECK HERE