

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 27, 2008 08:00 AM
Secretary of State

DOCUMENT # A01000001013

1. Entity Name
SBC DEVELOPMENTS, L.L.L.P.



Principal Place of Business
**1 SOUTH SCHOOL AVENUE, SUITE 500
SARASOTA, FL 34237**

Mailing Address
**1 SOUTH SCHOOL AVENUE, SUITE 500
SARASOTA, FL 34237**



DO NOT WRITE IN THIS SPACE

02152008 No Chg-LP

CR2E003 (12/06)

4. FEI Number
65-1123974

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LIEBERMAN, LARRY P
1 SOUTH SCHOOL AVENUE, SUITE 500
SARASOTA, FL 34237**

**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.

U00000842005
03/11/08-80010-018 500.00
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 # **A00000001762**
NAME **BGI DEVELOPMENT, L.L.L.P.**
STREET ADDRESS **1 SOUTH SCHOOL AVENUE, SUITE 500**
CITY-ST-ZIP **SARASOTA, FL 34237**

DOCUMENT # **M01000001672**
NAME **ALEXANDER BERNE/SBC LLC**
STREET ADDRESS **20 WEST 64TH STREET**
CITY-ST-ZIP **NEW YORK, NY 10023**

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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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

2/11/08
Date

941 955 8020
Daytime Phone #

STAPLE CHECK HERE