2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001265

1. Entity Name
BURKE FAMILY LIMITED PARTNERSHIP



FILED
Mar 17, 2008 08:00 A
Secretary of State

Principal Place of Business

1421 WEST TERRA MAR DRIVE POMPANO BEACH, FL 33062 Mailing Address

1421 WEST TERRA MAR DRIVE POMPANO BEACH, FL 33062



03072008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-1135853

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

BURKE, CATHERINE B 1421 WEST TERRA MAR DRIVE POMPANO BEACH, FL 33062

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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
٠.	NATURE .
511	NATURE

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.

	NOTE: General Partners MAT NOT be changed on the
12.	GENERAL PARTNER INFORMATION
DOCUMENT #	P01000079971
NAME	BURKE HOLDINGS, INC.
STREET ADDRESS	1421 WEST TERRA MAR DRIVE
CITY-ST-ZIP	POMPANO BEACH, FL 33062
DOCUMENT ≠	
NAME	
STREET ADDRESS	
- CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT#	
NAME	,

U00000862059 04/03/08-80034-007 500.00

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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 it 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:

STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
COCUMENT #
COCUMENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

mar. 10,08