

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

DOCUMENT # A01000001645

1. Entity Name  
ZUCKERMAN ENTERPRISES, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAR 31 PM 1:00

Principal Place of Business  
3408 WINDING OAKS DRIVE  
LONGBOAT KEY, FL 34228

Mailing Address  
3408 WINDING OAKS DRIVE  
LONGBOAT KEY, FL 34228

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03052005 Chg-LP CR2E003 (10/03)

4. FEI Number  
01-0566487

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZUCKERMAN, LEONARD J  
3408 WINDING OAKS DRIVE  
LONGBOAT KEY, FL 34228

7. Name and Address of New Registered Agent

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 title if applicable

DATE

9. Capital Contributions  
as Shown on record. \$1,500,000.00

10. Amount of Capital Contributions  
in FLORIDA to date. \$1,500,000.00

**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 # P01000119410  
NAME ZUCKERMAN INVESTMENT MANAGEMENT, INC.  
STREET ADDRESS 3408 WINDING OAKS DRIVE  
CITY-ST-ZIP LONGBOAT KEY, FL 34228

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

500049826385  
04/04/05--01081--010 \*\*526.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Leonard J. Zuckerman*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/21/05 941-383-6675

Date Daytime Phone #

STATE OF FLORIDA