2008 LIMITED PARTNERSHIP ANNUAL REFORT Due By May 1, 2008 **DOCUMENT #A02000000093** 1. Entity Name PARKSIDE ESTATES ASSOCIATES, LTD. Principal Place of Business Mailing Address 18851 NE 29TH AVE 18851 NE 29TH AVE **STE 700 STE 700** AVENTURA, FL 33180 **AVENTURA, FL 33180**

FILED May 02, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

04302008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 80-0033724

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POSNER, GARY D 18851 NE 29TH AVE STE 700 AVENTUDA EL 22190

DO NOT WRITE IN THIS SPACE

AVENTORA, LE 33100		
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
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.	CENERAL PARTNER INFORMATION	
DOCUMENT #	P02000003657	
NAME:	PARKSIDE ESTATES ASSOCIATES, INC.	Honorooveroo
STREET ADDRESS	18851 NE 29TH AVE, STE 700	
CITY-ST-ZIP	AVENTURA, FL 33180	U00000943588 05/23/08-80065-023 500.00
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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 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:

STAPLE CHECK HERE

AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #