


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

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

DOCUMENT # A02000000755	
1. Entity Name THE FITCH FAMILY LIMITED PARTNERSHIP	

Principal Place of Business C/O BONNIE J. ZACHER 1360 S.W. 12TH TERRACE BOCA RATON, FL 33486	Mailing Address C/O BONNIE J. ZACHER 1360 S.W. 12TH TERRACE BOCA RATON, FL 33486
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



03052008 Chg-LP CR2E003 (12/06)

4. FEI Number 01-0709575	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ZACHER, BONNIE 1360 SW 12TH TERRACE BOCA RATON, FL 33486	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	ZACHER, BONNIE J	CITY- ST- ZIP	
STREET ADDRESS	1360 S.W. 12TH TERRACE		
CITY- ST- ZIP	BOCA RATON, FL 33486		
DOCUMENT #		STREET ADDRESS	
NAME	ROZOVICS, KATHRYN A	CITY- ST- ZIP	
STREET ADDRESS	301 PARK AVENUE		
CITY- ST- ZIP	PRAIRIE DU SAC, WI 53578		
DOCUMENT #		STREET ADDRESS	
NAME		CITY- ST- ZIP	
STREET ADDRESS			
CITY- ST- ZIP			
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STREET ADDRESS			
CITY- ST- ZIP			

U000000854348
03/27/08-200704-009 50.00

U000000862434
04/03/08-20049-025 500.00

STAPLE CHECK HERE

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: Bonnie J Zacher Bonnie Zacher 3/8/07 561-393-0085

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER