

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

DOCUMENT # A03000000226

1. Entity Name  
 TAUB ASSOCIATES, LTD.



**FILED**

08 APR 21 PM 3:54

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



02292008 Chg-LP CR2E003 (12/06)

Principal Place of Business  
 103 QUAYSIDE DRIVE  
 JUPITER, FL 33477

Mailing Address  
 103 QUAYSIDE DRIVE  
 JUPITER, FL 33477

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
 APPLIED FOR

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TAUB, SHELDON J  
 103 QUAYSIDE DRIVE  
 JUPITER, FL 33477

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 \_\_\_\_\_

**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 #  
 NAME TAUB, SHELDON J  
 STREET ADDRESS 103 QUAYSIDE DRIVE  
 CITY-ST-ZIP JUPITER, FL 33477

STREET ADDRESS  
 CITY-ST-ZIP  
 04/17/08--01057--015 \*\*500.00

DOCUMENT #  
 NAME TAUB, ADRIENNE C  
 STREET ADDRESS 103 QUAYSIDE DRIVE  
 CITY-ST-ZIP JUPITER, FL 33477

STREET ADDRESS  
 CITY-ST-ZIP

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

STREET ADDRESS  
 CITY-ST-ZIP

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: \_\_\_\_\_

*Sheldon J Taub*  
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/17/08 5613461358  
 Date Daytime Phone #

STAPLE CHECK HERE