

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUN 12 PM 1:12

DOCUMENT # A03000000872

1. Entity Name  
MOLISANA PARTNERS LIMITED PARTNERSHIP



Principal Place of Business  
382 GULF SHORE BLVD. NORTH  
NAPLES, FL 34102-8422

Mailing Address  
107 FLORAL VALE BLVD.  
ATTN: JOE DELUCA  
YARDLEY, PA 19067

**DO NOT WRITE IN THIS SPACE**



04212008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
20-0127283

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

DELUCA, ALFONSO  
382 GULF SHORE BLVD. NORTH  
NAPLES, FL 34102-8422

**DO NOT WRITE  
IN THIS SPACE**

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

*Alfonso Deluca*  
Signature, typed or printed name of registered agent and title if applicable

4.22.08

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**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELUCA, ALFONSO  
382 GULF SHORE BLVD. NORTH  
NAPLES, FL 341028422

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CITY-ST-ZIP

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800129698308  
05/16/08--01045--006 \*\*500.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Alfonso Deluca*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

6.6.08

Date

215.860.6500

Daytime Phone #

STAPLE CHECK HERE