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

Apr 08, 2008 08:00 Al
Secretary of State

| D | OCUMENT       | # A0300001360 |
|---|---------------|---------------|
|   | F - 424 - 8.1 |               |

TBT PARTNERS, LLLP



Principal Place of Business

2300 GLADES RD., STE. 100E BOCA RATON, FL 33431 Mailing Address

2300 GLADES RD., STE. 100E BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

01282008 No Chg-LP CR2

CR2E003 (12/06)

4. FEI Number 56-2394970

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TBT EQUITY, LLC 2300 GLADES RD., STE. 100E BOCA RATON, FL 33431

## DO NOT WRITE IN THIS SPACE

|   | named entity submits this statement for the purpose of changing its re-<br>ions of registered agent. | gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept            |  |  |
|---|--|--|--|--|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE |  |  |  |  |
|   | FILE NOWIII FEE IS \$500.00<br>After May 1, 2008, Fee will be \$900.0                                | 00   |  |  |
|   |  | TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner. |  |  |
| 12.   | GENERAL PARTNER INFORMATION  |  |  |  |
| DOCUMENT #  | L03000035433   |  |  |  |
| NAME  | TBT EQUITY, LLC  |  |  |  |
| STREET ADDRESS  | 2300 GLADES RD., STE. 100E   |  |  |  |
| CITY ST-ZIP   | BOCA RATON, FL 33431   | (0000088561  |  |  |
| DOCUMENT #  |  | 04/18/08-80064-002 500.00  |  |  |
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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

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PONTED NAME OF SIGNING GET

William R. Greenfield

126/2008

561-392-6662

Daytime Phone #