


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAR 28 AM 8: 38

DOCUMENT # A03000001582		
1. Entity Name SAN MARINO AT MIROMAR LAKES LIMITED PARTNERSHIP		



03022008 Chg-LP CR2E003 (12/06)

4. FEI Number 20-0363319	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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Principal Place of Business 2245 VENETIAN COURT BLDG 4 NAPLES, FL 34109	Mailing Address 2245 VENETIAN COURT BLDG 4 NAPLES, FL 34109
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2. Principal Place of Business - No P.O. Box # 7869 Hawthorne Drive	3. Mailing Address P.O. Box 12169
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# Suite, Apt. #, etc. 302	Suite, Apt. #, etc.
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City & State Naples, FL	City & State Naples, FL
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Zip 34113	Country U.S.	Zip 34101	Country U.S.
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6. Name and Address of Current Registered Agent BATEMAN, ARTHUR L 2245 VENETIAN COURT BLDG 4 NAPLES, FL 34109	
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7. Name and Address of New Registered Agent Name Bateman, Arthur L. Street Address (P.O. Box Number is Not Acceptable) 7869 Hawthorne Drive, # 302 City Naples FL Zip Code 34113	
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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 3-14-08

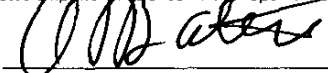
FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

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 STREET ADDRESS CITY-ST-ZIP	P03000122653 SAN MARINO AT MIROMAR LAKES, INC. 2245 VENETIAN COURT, BLDG 4 NAPLES, FL 34109	STREET ADDRESS CITY-ST-ZIP	7869 Hawthorne Drive, # 302 Naples, FL 34113
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800121246268
 03/26/08--01002--002 **500.00

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:  DATE 3-14-08 DAYTIME PHONE # (941) 793-8990

STAPLE CHECK HERE