

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # A05000000265 1. Entity Name ICOT ASSOCIATES, LLLP	
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Principal Place of Business 240 S. PINEAPPLE AVE., 10TH FLOOR SARASOTA, FL 34236	Mailing Address P.O. BOX 49948 SARASOTA, FL 34230-6948
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 20-2293672	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BAND, DAVID S 240 S. PINEAPPLE AVE., 10TH FLOOR SARASOTA, FL 34236

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

000000831277
02/27/08-80011-021 500.00

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 #	P99000006398
NAME	FLAMINGO CONSULTING AND MANAGEMENT, INC.
STREET ADDRESS	P.O. BOX 49948
CITY-ST-ZIP	SARASOTA, FL 342306948
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

David S. Band
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

2/5/08 941-366-1660