

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A05000000456

1. Entity Name
2 JERSEY GIRLS, LLLP



FILED

2007 MAR 29 AM 10: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address
89 SILVER OAKS CIRCLE **89 SILVER OAKS CIRCLE**
5202 **5202**
NAPLES, FL 34119 US **NAPLES, FL 34119 US**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
396 Lamplighter Dr **396 Lamplighter Dr**
Suite, Apt. #, etc. Suite, Apt. #, etc.

03222007 Chg-LP CR2E003 (12/06)

City & State City & State
Marco Island FL **Marco Island FL**
Zip Country Zip Country
34145 USA **34145 USA**

4. FEI Number ☒ Applied For
20-2440741 ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

TAMAGNI, ROSEMARIE
89 SILVER OAKS CIRCLE
5202
NAPLES, FL 34119

7. Name and Address of New Registered Agent

Name **n/a**
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, 2007, 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 **TAMAGNI, ROSEMARIE**
STREET ADDRESS **89 SILVER OAKS CIRCLE, #5202**
CITY-ST-ZIP **NAPLES, FL 34119**

DOCUMENT #
NAME **TAMAGNI, DIANE L**
STREET ADDRESS **396 LAMPLIGHTER DRIVE**
CITY-ST-ZIP **MARCO ISLAND, FL 34145**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **396 Lamplighter Dr.**
CITY-ST-ZIP **Marco Island, FL 34145**

STREET ADDRESS
CITY-ST-ZIP **600095698506**
04/03/07--01054--008 **500.00

STREET ADDRESS
CITY-ST-ZIP

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: **Rosemarie Tamagni** (X) 3/23/07 **Diane Tamagni** 239 642 3000