


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 12, 2008**

| | |
|---|---|
| DOCUMENT # A05000000827 1. Entity Name ILY PARTNERSHIP, LLLP |  |
|---|---|

FILED
 08 JUL 17 AM 11:22
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

| | |
|--|--|
| Principal Place of Business 1415 LADUE LANE SARASOTA, FL 34231 | Mailing Address 1415 LADUE LANE SARASOTA, FL 34231 |
|--|--|



DO NOT WRITE IN THIS SPACE

| | | |
|---|---------------------------------------|-----------------|
| 05062008 No Chg-LP | | CR2E003 (12/06) |
| 4. FEI Number 20-2757141 | Applied For Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

HUDSON, GEORGE T
 1415 LADUE LANE
 SARASOTA, FL 34231

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

800130682698
~~06/03/08 01025 012 **400.00~~
DATE

**FILE NOW!!! FEE IS \$900.00
 On or after September 12, 2008, Fee will be \$1000.00**

800130682698
 06/03/08--01025--012 **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 # | NAME STREET ADDRESS CITY - ST - ZIP |
| | HUDSON, GEORGE T TRUSTEE 1415 LADUE LANE SARASOTA, FL 34231 |
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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: George T. Hudson 7-7-08 941-993-5902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STATE UTILITY FEE