

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 30 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03062007 Chg-LP CR2E003 (12/06)

4. FEI Number
20-2982907

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

DOCUMENT # A05000001166

1. Entity Name
VERANDA SHOPPES, LTD.

Principal Place of Business
**120 E PALMETTO PARK ROAD STE 410
BOCA RATON, FL 33432**

Mailing Address
**120 E PALMETTO PARK ROAD STE 410
BOCA RATON, FL 33432**

2. Principal Place of Business - No P.O. Box #
One Financial Plaza
Suite, Apt. #, etc.
Suite 102
City & State
Ft. Lauderdale, FL
Zip
33394 Country
USA

3. Mailing Address
One Financial Plaza
Suite, Apt. #, etc.
Suite 102
City & State
Ft. Lauderdale, FL
Zip
33394 Country
USA

6. Name and Address of Current Registered Agent

DOUGLAS, STEPHEN M
120 E PALMETTO PARK ROAD STE 410
BOCA RATON, FL 33432

7. Name and Address of New Registered Agent

Name
Douglas, Stephen M
Street Address (P.O. Box Number is Not Acceptable)
One Financial Plaza
Suite 102
City
Ft. Lauderdale **FL** Zip Code
33394

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 **4-17-07**

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 #
L05000058026
NAME
VERANDA SHOPPES, LLC
STREET ADDRESS
120 E PALMETTO PARK ROAD STE 410
CITY-ST-ZIP
BOCA RATON, FL 33432

13. ADDRESS CHANGES ONLY

STREET ADDRESS
One Financial Plaza, Suite 102
CITY-ST-ZIP
Ft. Lauderdale, FL 33394

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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: DATE **4-17-07** (954) 616-1113

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE