


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY 22 PM 3:48

DOCUMENT # A05000001210
 1. Entity Name
 H VERANDA REALTY, LTD.



Principal Place of Business: 450 EAST LAS OLAS BLVD., SUITE 1500 FORT LAUDERALE, FL 33301
 Mailing Address: 450 EAST LAS OLAS BLVD., SUITE 1500 FORT LAUDERALE, FL 33301

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



01072008 Chg-LP CR2E003 (12/06)

4. FEI Number: 20-4706410
 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent
 AMERICAN INFORMATION SERVICES, INC.
 LAS OLAS CENTRE II, SUITE 1600
 350 E. LAS OLAS BLVD.
 FORT LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent
 Service U.S.A., Inc
 450 E. Las Olas Blvd.
 Suite 1500
 Ft. Lauderdale, FL 33301
 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: Cris V Brandon, VP DATE: 4/16/08

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	
DOCUMENT #	H03880
NAME	HUIZENGA HOLDINGS, INC.
STREET ADDRESS	450 EAST LAS OLAS BLVD., SUITE 1500
CITY-ST-ZIP	FORT LAUDERALE, FL 33301
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	500129801605 05/19/08--01033--007 **500.00
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

STAPLE CHECK HERE

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: Cris V Brandon Date: 4/16/08