


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # A05000002117	
1. Entity Name PICARD FAMILY LIMITED PARTNERSHIP	

Principal Place of Business 20 COPPERGATE ROAD EAST GRANBY, CT 06026-9511	Mailing Address 20 COPPERGATE ROAD EAST GRANBY, CT 06026-9511
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DO NOT WRITE IN THIS SPACE

	
01072008 No Chg-LP	CR2E003 (12/06)
4. FEI Number 20-2262179	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 LEHRMAN, RICHARD ALAN 777 ARTHUR GODFREY ROAD, FOURTH FLOOR MIAMI BEACH, FL 33140
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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

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 #	D05000000022
NAME	HARRISON REYNOLDS PICARD MANAGEMENT TRUST
STREET ADDRESS	20 COPPERGATE ROAD
CITY-ST-ZIP	EAST GRANBY, CT 060269511
DOCUMENT #	D05000000023
NAME	SALLY BORG PICARD MANAGEMENT TRUST
STREET ADDRESS	20 COPPERGATE ROAD
CITY-ST-ZIP	EAST GRANBY, CT 060269511
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/15/08-80030-002 500.00

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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: *Sally Borg Picard* 1/7/08 860-653-7465

SIGNATURE AND TYPE
Harrison & Sally Picard
 20 Coppergate

Date Daytime Phone #