

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 JUN 10 AM 9:16

DOCUMENT # A05000002311	
1. Entity Name SPG-TIGER FUND, LTD.	



Principal Place of Business 2700 N. MILITARY TRAIL, SUITE 150 BOCA RATON, FL 33431	Mailing Address 2700 N. MILITARY TRAIL, SUITE 150 BOCA RATON, FL 33431
--	--

2. Principal Place of Business - No P.O. Box # 16074 ROSECROFT TERRACE Suite, Apt. #, etc.	3. Mailing Address 16074 ROSECROFT TERRACE Suite, Apt. #, etc.
--	--

City & State Delray Beach, Florida	City & State
Zip 33446	Country USA



01022008 Chg-LP CR2E003 (12/06)

4. FEI Number 83-0474304	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 TRISTINO, JOHN R 16074 ROSECROFT TERRACE DELRAY BEACH, FL 33446	7. Name and Address of New Registered Agent Name 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, 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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L02000012955 ASSET MANAGEMENT GROUP, LLC 2700 N. MILITARY TRAIL, SUITE 150 BOCA RATON, FL 33431	STREET ADDRESS CITY-ST-ZIP	16074 ROSECROFT TERRACE Delray Beach, FL 33446
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	300130682563 06/03/08-01025-006 **500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS 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: <i>John R. Tristino</i>	5/1/08	5618185396
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date	Daytime Phone #