2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # A0600001272

1. Entity Name
SHEENA FAMILY LTD.



FILED
May 01, 2008 08:00 AN
Secretary of State

Principal Place of Business

6962 N.W. 66TH WAY PARKLAND, FL 33067 Mailing Address 6962 N.W. 66TH WAY PARKLAND, FL 33067



DO NOT WRITE IN THIS SPACE

04242008 No Chg-LP CR2E003 (12/06)

4. FEI Number
20-5790983

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GLASSER, GENE K ESQ. 100 WEST CYPRESS CREEK ROAD SUITE 700 FT. MYERS, FL 33309 DO NOT WRITE IN THIS SPACE

8.	I. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flor	rida. I	am familiar with, and accept
	the obligations of registered agent.		

SIGNATURE

Signature, typed or printed name of registered agent and tide if applicable

U00000925599 v= /22/09_90090-008_500.U

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 # NAME STREET ADDRESS City-St-Zip	MARK BUTTERS AND MARCIE BUTTERS, AS TENANT 6962 N.W. 66TH WAY PARKLAND, FL 33067				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP					
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14. I hereby o	14. I hereby certify that the information supplied with this filling does not qualify for				

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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:

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #