

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A21557

**FILED**  
**Feb 18, 2008**  
**Secretary of State**

**Entity Name:** COLONIAL VILLAGE SHOPPING CENTER, LTD., LLLP

**Current Principal Place of Business:**

4601 PONCE DE LEON BLVD.  
SUITE 300  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

4601 PONCE DE LEON BLVD.  
SUITE 300  
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** 59-2660299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERRIN, ROBERT G.  
4601 PONCE DE LEON BLVD.  
SUITE 300  
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: BERRIN, ROBERT G.  
Address: 4601 PONCE DE LEON BLVD. #300  
City-St-Zip: CORAL GABLES, FL 33146

Document #:

Name: BERRIN, RAY  
Address: 9001 SW 56TH COURT  
City-St-Zip: MIAMI, FL 33156

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT G. BERRIN

GP

02/18/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date