

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

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

DOCUMENT # A29338

1. Entity Name
MIRAMAR PLAZA ASSOCIATES, LTD.



Principal Place of Business
**41-79 S. PALM AVENUE
SARASOTA, FL 34236**

Mailing Address
**711 S. OSPREY AVE
STE. 1
SARASOTA, FL 34236**



04172008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0159174	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KAURRMAN, GARY ESQ
1990 MAIN ST STE 700
SARASOTA, FL 34236**

**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 _____
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**

**U000000942979
05/29/08-80042-003 500.00**

**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 #	L35924
NAME	MIRAMAR PLAZA ASSOC., INC
STREET ADDRESS	711 S. OSPREY AVE, STE. 1
CITY-ST-ZIP	SARASOTA, FL 34236
DOCUMENT #	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 *Man K Kaurman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

24608

941-350-6314

Date Daytime Phone #

STAPLE CHECK HERE