

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # A30608

1. Entity Name
ROTHMAN FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**

Mailing Address
**5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**



01172008 No Chg-LP

CR2E003 (12/06)

4. FEI Number
59-3030013

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**LANE, CAROL R.
5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**

**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

U000000815918
02/14/08-80028-023 500.00
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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**LANE, CAROL R.
5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**GREEN, MARGIE R.
5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**WYGLE, NANCY R.
5700 70TH AVENUE NORTH
PINELLAS PARK, FL 33781**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
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:

Carol R. Lane

Carol R. Lane

1/22/08

727-545-9555