

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 12, 2008

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 SEP 10 AM 9:46

DOCUMENT # A32211	
1. Entity Name MAX SIEGEL TRUSTS, LTD.	



Principal Place of Business C/O ESTELLE D. SIEGEL 3160 BURGUNDY DRIVE, NORTH PALM BEACH GARDENS, FL 33410	Mailing Address C/O MYCFO, INC. 3348 PEACHTREE ROAD, SUITE 500 ATLANTA, GA 30080
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address c/o The Fairman Group LLC 801 Cassatt Rd, Ste 111 City & State Bernwyn PA Zip 19312 Country USA
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08222008 Chg-LP CR2E003 (12/06)

4. FEI Number 65-0310825	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SIEGEL, ESTELLE D 3160 BURGUNDY DRIVE, NORTH PALM BEACH GARDENS, FL 33410	
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
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	SIEGEL, ESTELLE D TRUSTEE	STREET ADDRESS	
NAME	3160 BURGUNDY DR., NORTH	CITY ST ZIP	
STREET ADDRESS	PALM BEACH GARDENS, FL 33410		
CITY ST ZIP			
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CITY ST ZIP			

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09/10/08--01027--003 **500.00

Estelle D Siegel

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:

Estelle D Siegel

8/27/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE