

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 12, 2008**

**DOCUMENT #A32413**

1. Entity Name  
SENSATIONS, LTD.



Principal Place of Business

337 EAST INDIANTOWN ROAD, SUITE 14  
JUPITER, FL 33477

Mailing Address

337 EAST INDIANTOWN ROAD, SUITE 14  
JUPITER, FL 33477

**FILED**  
**Sep 03, 2008 08:00 AM**  
**Secretary of State**



07092008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0301237

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROORK, JAY  
337 EAST INDIANTOWN ROAD, SUITE 14  
JUPITER, FL 33477

**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**  
**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

DOCUMENT # S96423  
NAME SENSATIONS, INC.  
STREET ADDRESS 337 EAST INDIANTOWN ROAD, SUITE 14  
CITY-ST-ZIP JUPITER, FL 33477

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CITY-ST-ZIP

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U00000958968  
09/03/08-80011-007 500.00

**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:

*Jay V Roork*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*Pres.*

Date

8/28/08-561-743-9333

Daytime Phone #

STAPLE CHECK HERE