## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

## DOCUMENT # A94000001218

1. Entity Name

RONALD W. SHANE FAMILY, LTD.



FILED Mar 06, 2008 08:00 A Secretary of State

Principal Place of Business

8301 NW 197 STREET MIAMI, FL 33015 Mailing Address

8301 NW 197 STREET MIAMI, FL 33015



03042008 No Chg-LP

CR2E003 (12/06)

4.	FEI Number		Applied For	
	65-0515207		Not Applicable	
5.	Certificate of Status Desired	\$8.75 Fee Re	5 Additional adulted	

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CHEEMA, BALWANT 8301 NW 197 STREET MIAMI, FL 33015 DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the obligations of registered agent.</li></ol>	he State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if approprie	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.

Į	12	GENERAL PARTNER INFORMATION		
	DUCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	SHANE, RONALD W 8301 NW 197 STREET MIAMI, FL 33015		
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			
	DOCUMENT # NAML STREET ADDRESS CITY+ST-ZIP			
	DOCUMENT # NAME STREET ADDRESS CITY+ST-ZIP			
	DOCUMENT # HAME STREET ADDRESS CITY-ST-ZIP			
	DOCUMENT / NAME STREET ACORESS CHY-ST-ZIP			

000000850037 03/21/08-80045-016 500.00

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: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-4-08

Daylime Phone #