

2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008

DOCUMENT # A94000001748 1. Entity Name KRAMER FAMILY LIMITED PARTNERSHIP	
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FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY 22 PM 3: 50



Principal Place of Business 4706 BOCAIRE BLVD. BOCA RATON FL 33487	Mailing Address 4706 BOCAIRE BLVD. BOCA RATON FL 33487
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E003 (10/07)	
4. FEI Number 65-0541597	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	
KRAMER, SARAH 4706 BOCAIRE BLVD. BOCA RATON FL 33487	

7. Name and Address of New Registered Agent	
Name	GLENN KRAMER
Street Address (P.O. Box Number is Not Acceptable)	
4706 Bocaire Blvd.	
City	Boca Raton FL 33487

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 obligation of registered agent.	
SIGNATURE <i>Sarah Kramer / Glenn</i>	DATE 4/22/08

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #	KRAMER, SARAH 4706 BOCAIRE BLVD. BOCA RATON FL 33487	STREET ADDRESS	600129506916 05/15/08--01002--019 **\$500.00
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS		CITY-ST-ZIP	

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: <i>Sarah Kramer</i>	DATE: 4/22/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	

STAPLE CHECK HERE