

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

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A95000000216**

1. Entity Name  
DB-RAM ASSOCIATES, LTD.



Principal Place of Business  
1921 MONTE CARLO DRIVE, UNIT 703  
SARASOTA, FL 34231

Mailing Address  
P.O. BOX 20708  
SARASOTA, FL 34276

**DO NOT WRITE IN THIS SPACE**



04182008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
65-0564916

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SEIDER, WILLIAM M  
200 S. ORANGE AVE.  
SARASOTA, FL 34236

**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**  
**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 # P95000004519  
NAME DB-RAM ASSOCIATES, INC.  
STREET ADDRESS 1921 MONTE CARLO DRIVE UNIT 703  
CITY - ST - ZIP SARASOTA, FL 34231

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000000937130  
05/27/08-80038-008 500.00

**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:**

ROBERT A. MORRIS, JR

04/21/2008

941-923-6353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE