

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # A96000000586

1. Entity Name
FRISCH FAMILY PARTNERSHIP, LTD.



Principal Place of Business
**1741 WEST BEAVER STREET
JACKSONVILLE, FL 32209**

Mailing Address
**P.O. BOX 41430
JACKSONVILLE, FL 32203-1430**



04212007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3368084

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FRISCH, HANS
1741 WEST BEAVER STREET
JACKSONVILLE, FL 32209**

**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, 2007, 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 # **P96000026322**
NAME **HF/BSF ENTERPRISES, INC.**
STREET ADDRESS **1741 WEST BEAVER STREET**
CITY-ST-ZIP **JACKSONVILLE, FL 32209**

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U000000739181
05/14/07-80015-008 500.00

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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:

Hans Frisch

**HANS FRISCH, PRESIDENT
OF HF/BSF ENTERPRISES, INC. 4/25/07**

**(904)
354-8533**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE