

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000000997

**FILED**  
**Apr 05, 2008**  
**Secretary of State**

**Entity Name:** PHILIP SCHWARTZ FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

13356 88TH AVENUE NORTH  
SEMINOLE, FL 33776

**New Principal Place of Business:**

1117-A BEN FRANKLIN DRIVE  
SARASOTA, FL 34236

**Current Mailing Address:**

13356 88TH AVENUE NORTH  
SEMINOLE, FL 33776

**New Mailing Address:**

1117-A BEN FRANKLIN DRIVE  
SARASOTA, FL 34236

**FEI Number:** 59-3382356

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHWARTZ FAMILY MANAGEMENT COMPANY  
13356 88TH AVENUE NORTH  
SEMINOLE, FL 33776 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P96000025540  
Name: SCHWARTZ FAMILY MANAGEMENT COMPANY  
Address: 13356 88TH AVENUE NORTH  
City-St-Zip: SEMINOLE, FL 33776

**ADDRESS CHANGES ONLY:**

Address: 1117-A BEN FRANKLIN DRIVE  
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MAUREEN SCHWARTZ BINDERMAN

PRES

04/05/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date