

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000001061

**FILED**  
**Apr 02, 2009**  
**Secretary of State**

**Entity Name:** FOGEL FAMILY INVESTMENTS, LLLP

**Current Principal Place of Business:**

ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

**FEI Number:** 65-0704668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATRICIA LEBOW, P.A.  
ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 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 #:

Name: LEBOW, PATRICIA TRUSTEE  
Address: ONE NORTH CLEMATIS STREET, SUITE 500  
City-St-Zip: WEST PALM BEACH, FL 33401 US

Document #:

Name: LYDIAN BANK & TRUST  
Address: ONE N. CLEMATIS STREET SUITE 500  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address: 180 ROYAL PALM WAY  
City-St-Zip: PALM BEACH, FL 33480

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: PATRICIA LEBOW

GP

04/02/2009

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

\_\_\_\_\_  
Date