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

#### DOCUMENT # A96000001786

1. Entity Name

THE WILKOV FAMILY LIMITED PARTNERSHIP



Mailing Address

Principal Place of Business 997 BLUEWOOD TERRACE WESTON, FL 33327-2052

11450 INTERCHANGE CIRCLE NORTH GELBER & COMPANY MIRAMAR, FL 33025

### FILED Jan 16, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

01082008 No Chg-LP CR2

CR2E003 (12/06)

4. FEI Number 65-0697376 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

WILKOV, HOWARD R 997 BLUEWOOD TERRACE WESTON, FL 33327-2052

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<ol> <li>The above named entity submits this statement for the purpose of changing its registered the obligations of registered agent.</li> </ol>	office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed of printed name of registered agent and title if applicable	DATE
FILE NOW!!! FEE IS \$500.00	The second of th

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.

GENERAL PARTNER INFORMATION 12. DOCUMENT # NAME WILKOV, HOWARD R STREET ADDRESS 997 BLUEWOOD TERRACE CITY-ST-ZIP WESTON, FL 333272052 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7P DOCUMENT # STREET ADDRESS

U00000786487 01/17/08-80042-012 500.00

## 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:

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

MOWARD K SILLOW
NATURE AND TYPED OR PRINTED HAME OF SIGNING GENERAL PARTNER

11/14/2008

<u>cel[ 954 729 3321</u>