2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 28, 2008 08:00 AN Secretary of State

DOCUMENT # A9600001885 1. Entity Name MADRAS, LTD.		
Principal Place of Business 1663 MOUND STREET SARASOTA, FL 34236	Mailing Address 1663 MOUND STREET SARASOTA, FL 34236	

6. Name and Address of Current Registered Agent



DO NOT WRITE IN THIS SPACE 04182008 No Ch 4. FEI Number 65-0700465

04182008 No Chg-LP CR2E003 (12/06)

4. FEI Number
65-0700465

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

FURMAN, ROBERT 1663 MOUND STREET SARASOTA, FL 34236

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FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00	
Signature, typed or printed name of registered agent and title if applicable.	DATE
SIGNATURE ————————————————————————————————————	05/20/08-80018-022 500.00
the obligations of registered agent.	U00000925269
The above named entity submits this statement for the purpose of changing its registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accep

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 P96000101383 DOCUMENT # NEPENTHE, INC. NAME STREET ADDRESS 1663 MOUND STREET CITY-ST-7IP SARASOTA, FL 34236 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-\$1-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-22-2009

941-365-789

Daytime Phone #