

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Mar 29, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # A96000002203**

1. Entity Name  
**PRIDE UNITED LIMITED PARTNERSHIP**



Principal Place of Business  
**2139 PALM BEACH LAKES BLVD.  
WEST PALM BEACH, FL 33409**

Mailing Address  
**2139 PALM BEACH LAKES BLVD.  
WEST PALM BEACH, FL 33409**



03092007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

**65-0728320**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**SCAROLA, JOHN  
2139 PALM BEACH LAKES BLVD.  
WEST PALM BEACH, FL 33409**

**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 # **P96000095506**  
NAME **SDSB&S REALTY CORP.**  
STREET ADDRESS **2139 PALM BEACH LAKES BLVD.**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33409**

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000000583055  
04/05/07-80027-017 500.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-27-07

Date

561-688-6300

Daytime Phone #

STAPLE CHECK HERE