

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000002482

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** THE MILTON PARTNERSHIP, LTD.

**Current Principal Place of Business:**

44 COCOANUT ROW, APARTMENT B-415  
% SYLVIA W. FELDMAN  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LESLIE FELDMAN, ESQ  
277 BROADWAY  
NEW YORK, NY 10007

**New Mailing Address:**

**FEI Number:** 65-0742901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELDMAN, SYLVIA W  
44 COCOANUT ROW, APARTMENT B-415  
PALM BEACH, FL 33480 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: FELDMAN, SYLVIA W  
Address: 44 COCOANUT ROW, APARTMENT B-415  
City-St-Zip: PALM BEACH, FL 33480

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: FELDMAN, LESLIE C  
Address: 277 BROADWAY, SUITE 601  
City-St-Zip: NEW YORK, NY 10007

Address:  
City-St-Zip:

Document #:

Name: FELDMAN, JEFFREY W  
Address: 41 WHEATLEY ROAD  
City-St-Zip: UPPER BROOKVILLE, NY 11545

Address:  
City-St-Zip:

I hereby 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: LESLIE C. FELDMAN

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

01/08/2010

\_\_\_\_\_  
Date