

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000000369

**FILED**  
**Mar 03, 2009**  
**Secretary of State**

**Entity Name:** LUSTGARTEN FINANCIAL LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1850 HOMEWOOD BLVD., #408  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

1850 HOMEWOOD BLVD.  
408  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

1850 HOMEWOOD BLVD., #408  
DELRAY BEACH, FL 33445

**New Mailing Address:**

1850 HOMEWOOD BLVD.  
408  
DELRAY BEACH, FL 33445

FEI Number: 65-0737696

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHWARTZ, BARBARA  
2500 N. MILITARY TRAIL, #260  
BOCA RATON, FL 33431 US

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

SCHWARTZ, BARBARA  
2500 N. MILITARY TRAIL  
260  
BOCA RATON, FL 33431 US

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:

03/03/2009

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: LUSTGARTEN, KAREN  
Address: 1850 HOMEWOOD BLVD., #408  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: KAREN LUSTGARTEN

03/03/2009

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

\_\_\_\_\_  
Date