

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 12 PM 4:52

DOCUMENT # A97000001058

1. Entity Name
BOLLINGER HOLDINGS, LTD.



Principal Place of Business
4401 GULF SHORE BLVD., PH 8
NORTH NAPLES, FL 34103

Mailing Address
P.O. BOX 22345
LOUISVILLE, KY 40252-0345



03192008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3452092

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOLLINGER, PAUL PARKER SR.
4401 GULF SHORE BLVD., PH 8
NORTH NAPLES, FL 33940

**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, 2008, 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 #
NAME
STREET ADDRESS
CITY - ST - ZIP
BOLLINGER, PAUL PARKER SR.
4401 GULF SHORE BLVD., PH 8
NORTH NAPLES, FL 33940

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
PATRICIA SULLIVAN BOLLINGER
4401 GULF SHORE BLVD., PH 8
NORTH NAPLES, FL 33940

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

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04/24/08-- 01004-025-\$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: *Paul D. Bollinger, Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

5/6/08 502-425-1300

STAPLE ON BACK HERE