

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 12, 2008**

**DOCUMENT # A97000001264**

1. Entity Name  
**SILVERSTEIN FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**1901 FLOYD STREET  
SARASOTA, FL 34239**

Mailing Address  
**1901 FLOYD STREET  
SARASOTA, FL 34239**

**FILED**  
**Jul 15, 2008 08:00 AM**  
**Secretary of State**



07072008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**65-0768440**

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**

**SILVERSTEIN, HERBERT  
1901 FLOYD STREET, SUITE A  
SARASOTA, FL 34239**

**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 07/15/08-80007-001 500.00  
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**  
**Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**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 # **P97000047241**  
NAME **H.S. FINANCIAL, INC.**  
STREET ADDRESS **1901 FLOYD STREET**  
CITY-ST-ZIP **SARASOTA, FL 34239**

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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

Date

Daytime Phone #

7/7/08

941-366-9222