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

## DOCUMENT # A98000000839

1. Entity Name THE BURGER FAMILY LIMITED PARTNERSHIP



**FILED** Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business 210 COCONUT KEY DR PALM BEACH GARDENS, FL 33418 Mailing Address 210 COCONUT KEY DR

PALM BEACH GARDENS, FL 33418



## DO NOT WRITE IN THIS SPACE

04172007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0827652 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURGER, ROBERT 210 COCONUT KEY DR PALM BEACH GARDENS, FL 33418			IN THIS SPACE	
the obligat	named entity submits this statement for the purpose of changing ions of registered agent.	its registered office or registered agent, or both, in the State of Flo	orida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.			DATE	
12.	GENERAL PARTNER INFORMATION			
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	P98000023747 THE BURGER FAMILY CORP. 210 COCONUT KEY DR PALM BEACH GARDENS, FL 33418	J000007:		
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP			0019-019 500.00	

# 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:

DOCUMENT # NAME

STREET ADDRESS CITY-ST-ZIP

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone I