

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Jan 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # A98000000860**

1. Entity Name  
**HELD LIMITED PARTNERSHIP**



Principal Place of Business  
**3001 DC COUNTRY CLUB BLVD #754  
DEERFIELD BEACH, FL 33442**

Mailing Address  
**3100 N. OCEAN BLVD., SUITE 1007  
FORT LAUDERDALE, FL 33308**



01082008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0854190**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HELD, RUTH  
3001 DC COUNTRY CLUB BLVD #754  
DEERFIELD BEACH, FL 33442**

**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  
**HELD, RUTH TRUSTEE  
3001 DC COUNTRY CLUB BLVD #754  
DEERFIELD BEACH, FL 33442**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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U00000784741  
01/16/08-80056-020 508.75

**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:** *Ruth Held* **TRUSTEE RUTH HELD**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

*1/10/08*

Daytime Phone #

STAPLE CHECK HERE