

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # A98000001563

1. Entity Name
MARMEL ASSOCIATES, LTD.



Principal Place of Business
**2615 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328**

Mailing Address
**P.O. BOX 15728
PLANTATION, FL 33318-5728**



01042007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2467249

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARMEL ASSOCIATES, INC.
2615 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328**

**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.

U00000580356
01/10/07-80042-023 500.00

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 # **P98000057097**
NAME **MARMEL ASSOCIATES, INC.**
STREET ADDRESS **2615 SOUTH UNIVERSITY DRIVE**
CITY-ST-ZIP **DAVIE, FL 33328**

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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:

Mark E. Stelnik **1/5/07** **954 474-2800**
President, MarMel Associates, Inc.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE