

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # A98000002592

1. Entity Name
RAMLEE HOLDINGS LIMITED PARTNERSHIP



Principal Place of Business
**5536 ISLEWORTH COUNTRY CLUB DRIVE
WINDERMERE, FL 34789**

Mailing Address
**5536 ISLEWORTH COUNTRY CLUB DRIVE
WINDERMERE, FL 34789**



01082008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3543122	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CRAIN, RAMSAY E
5536 ISLEWORTH COUNTRY CLUB DRIVE
WINDERMERE, FL 34789**

**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 #	L98000002783
NAME	DORM, LLC
STREET ADDRESS	5536 ISLEWORTH COUNTRY CLUB DRIVE
CITY-ST-ZIP	WINDERMERE, FL 34789
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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02/20/08-80040-014 500.00

**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: STEPHEN B. HOFMANN **Authorized REP** 1/25/08 (407) 230-0737
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE