

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Mar 25, 2008 08:00 AM
Secretary of State

DOCUMENT # A99000000008

1. Entity Name
MARSHA O. LEVY FAMILY PARTNERSHIP, LTD.



Principal Place of Business
**1255 W ATLANTIC BLVD
SUITE 218
POMPAÑO BEACH, FL 33069**

Mailing Address
**1255 W ATLANTIC BLVD
SUITE 218
POMPAÑO BEACH, FL 33069**



01072008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0884530

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEVY, MARSHA O
1255 W ATLANTIC BLVD
SUITE 218
POMPAÑO BEACH, FL 33069**

**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**

U00000869587
04/09/08-80055-022 500.00

**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 # **P98000108102**
NAME **MARSHA OSTER LEVY, INC.**
STREET ADDRESS **1255 W. ATLANTIC BLVD. SUITE 218**
CITY-ST-ZIP **POMPAÑO BEACH, FL 33069**

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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: Marsha O. Levy MARSHA O. LEVY 3/21/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #

954-7670349

STAPLE CHECK HERE