


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

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A99000000288</b> 1. Entity Name J & S GERSON FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business 11482 VICTORIA CIRCLE BOYNTON BEACH, FL 33437	Mailing Address 11482 VICTORIA CIRCLE BOYNTON BEACH, FL 33437
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**DO NOT WRITE IN THIS SPACE**



01172008 No Chg-LP

CR2E003 (12/06)

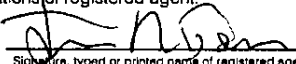
4. FEI Number 65-0962274	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GERSON, JEROME R  
11482 VICTORIA CIRCLE  
BOYNTON BEACH, FL 33437

**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  DATE 1-28-08

Signature, typed or printed name of registered agent and title if applicable.

**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 #	P99000008786
NAME	JSG REALTY CORP.
STREET ADDRESS	11482 VICTORIA CIRCLE
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000809645  
02/08/08-80031-002 500.00

**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 X**  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER** X 1-28-08 X 561 738 9076

Signature, typed or printed name of registered agent and title if applicable.

STAPLE CHECK HERE