

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # A99000002091

1. Entity Name
HENDLER PARTNERS, LIMITED PARTNERSHIP



Principal Place of Business
**21493 LINWOOD COURT
BOCA RATON, FL 33433**

Mailing Address
**21493 LINWOOD COURT
BOCA RATON, FL 33433**



02152007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-3692393

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**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, 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 #
NAME
STREET ADDRESS
CITY - ST - ZIP
**HENDLER, ROBERT C
21493 LINWOOD COURT
BOCA RATON, FL 33433**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**HENDLER, AUTA P
21493 LINWOOD COURT
BOCA RATON, FL 33433**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**BERLAMINO, STEPHEN P
106 E. RIDGEWOOD AVENUE
PARAMUS, NJ 07652**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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05/14/07-80015-005 500.00

**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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/30/07 (561) 487-6939
Date Daytime Phone #

STAPLE CHECK HERE