

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # A99000002236

1. Entity Name
IDEAL INDUSTRIAL PROPERTIES, LTD.



Principal Place of Business
**PMB #187, 2545 E. SUNRISE BLVD.
FORT LAUDERDALE, FL 33304**

Mailing Address
**PMB #187, 2545 E. SUNRISE BLVD.
FORT LAUDERDALE, FL 33304**



01182008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0969789

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SEVERNS, GARY
2545 E. SUNRISE BLVD. #187
FORT LAUDERDALE, FL 33304**

**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**

U00000791688
01/23/08-80085-011 500.00

**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 # **L99000009288**
NAME **IDEAL INDUSTRIAL PROPERTIES, L.L.C.**
STREET ADDRESS **PMB #187, 2545 E. SUNRISE BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33304**

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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:

GARY SEVERNS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

Daytime Phone #

**1-18-8 562
260-7991**

STAPLE CHECK HERE