


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

**FILED
Apr 21, 2008 08:00 A
Secretary of State**

DOCUMENT # B02000000021
1. Entity Name
AVANTI PROPERTIES GROUP, L.L.L.P., LTD.



Principal Place of Business
923 NORTH PENNSYLVANIA AVENUE
WINTER PARK, FL 32789

Mailing Address
923 NORTH PENNSYLVANIA AVENUE
WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE



01152008 No Chg-LP CR2E003 (12/06)

4. FEI Number 59-3433819	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SCHWARTZ, CHARLES
923 NORTH PENNSYLVANIA AVENUE
WINTER PARK, FL 32789

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

000000910452
05-07-08 800.966.9993

**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 # NAME STREET ADDRESS CITY - ST - ZIP	K37308 AVANTI DEVELOPMENT CORPORATION 923 NORTH PENNSYLVANIA AVENUE WINTER PARK, FL 32789
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STAPLE CHECK HERE

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]* **4/7/08** **800.966.9993**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #