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

1	MENT # B0700000				7 1 L C	لها			
1. Entity Name JILL AND	GIRLS LIMITED PARTNE						0		
					2008 APR -9 PM 12: 49				
Principat Place of Business 777 YAMATO ROAD STE 300 BOCA RATON, FL 33431		Mailing Address 777 YAMATO ROAD STE 300 BOCA RATON, FL 33431		SE TAL	CRETARY C LAHASSEE	F STAT	DA.		
}									
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01162008	Chg-LP	CR2E0	03 (12/06)		
City & State		City & State		4. FÉI Numbei	r	,	Applied For Not Applicabl		
Zip Country		Zip	Zip Country		5. Certificate o	of Status Desired	H	\$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent		Name	7. Name and	Address of New F	Registered /	Agent	
	WYLER, SCOTT L				Street Address (P.O. Box Number is Not Acceptable)				
777 YAMAT BOCA RAT		Street Address		P.O. Box Number	r is Not Acceptabl	e)			
}									
				City			FL Zip Code		
	named entity submits this statement ons of registered agent.	or the purpose of changing	g its register	ed office or register	red agent, or both	n, in the State of Fl	orida. I am	familiar with, and accep	
SIGNATURE -	Signature, typed or printed name of registered age	nt and title if applicable.			· <u></u>		DATE		
		WIII FEE IS \$500.00	0			1			
	After May 1,	2008, Fee will be \$	900.00				, ,	N=+6 2+6 2	
	A GENERAL PARTNER NOTE: General Partners M								
12.		R INFORMATION	13.			ADDRESS CH	ANGES ON	LY	
DOCUMENT / NAME				EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	777 YAMATO ROAD STE 300 BOCA RATON, FL 33431		cm	Y-ST-ZIP	04/03/	01220 0801034	ा <u>विवा</u> 023	**508.75	
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STREET ADDRESS CITY-ST-ZIP			сп	Y-ST-ZIP					
1	certify that the information supplied on this report is true and accurate a seiver or trustee empowered to execu	vith this filling does not qua id that my signature shall h te this report as required by	alify for the enave the same y Chapter 6:	exemptions contain ne legal effect as if 20, Florida Statutes	ed in Chapter 119 made under oath	9, Florida Statutes ; that I am a Gene	. I further ce eral Partner o	ritify that the information of the limited partnership	
SIGNAT	URE:	OR PRINTED NAME OF SIGNING GE	ENERAL PARTI	NER VER	1 1 1 .	Date		Daytijne Phone #	