

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000894

**FILED**  
**Feb 18, 2009**  
**Secretary of State**

**Entity Name:** HELEN REAVES FAMILY LIMITED PARTNERSHIP, LTD.

**Current Principal Place of Business:**

8539 CONCORD COURT  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

2031 E. 19TH STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

8539 CONCORD COURT  
JACKSONVILLE, FL 32208

**New Mailing Address:**

2031 E. 19TH STREET  
JACKSONVILLE, FL 32206

**FEI Number:** 54-2125115

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLD, KATHLEEN H  
ONE INDEPENDENT DRIVE, STE. 2301  
JACKSONVILLE, FL 32208 US

**Name and Address of New Registered Agent:**

COLD, KATHLEEN H  
ONE INDEPENDENT DRIVE, STE. 2301  
JACKSONVILLE, FL 32202 US

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.

SIGNATURE:

02/18/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P97000061050  
Name: HELEN M. REAVES FAMILY INVESTMENT, INC.  
Address: 8539 CONCORD COURT  
City-St-Zip: JACKSONVILLE, FL 32208

**ADDRESS CHANGES ONLY:**

Address: 2031 E. 19TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MARILYN R. DAVIS

02/18/2009

Electronic Signature of Signing General Partner

Date