

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001588

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** PASCO COUNTY ASSOCIATES I, LLLP

**Current Principal Place of Business:**

1600 SAWGRASS CORP PARKWAY, SUITE 400  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1600 SAWGRASS CORP PARKWAY, SUITE 400  
SUNRISE, FL 33323

**New Mailing Address:**

**FEI Number:** 20-3318830

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PASCO COUNTY I CORPORATION  
1600 SAWGRASS CORP PARKWAY, SUITE 400  
SUNRISE, FL 33323 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P05000109899  
Name: PASCO COUNTY I CORPORATION  
Address: 1600 SAWGRASS CORP PARKWAY, SUITE 400  
City-St-Zip: SUNRISE, FL 33323

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: RICHARD M. NORWALK

V

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date