

# 2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A94000000794

Entity Name: VALVERDE FAMILY LIMITED

FILED  
Apr 26, 2004  
Secretary of State

**Current Principal Place of Business:**

4107 SALTWATER BLVD.  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

2109 E. PALM AVE.  
SUITE 203  
TAMPA, FL 33605

**New Mailing Address:**

2203 N. LOIS AVE  
SUITE 937  
TAMPA, FL 33607

FEI Number: 65-0536497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVY, BUDDY J  
2109 E. PALM AVE., STE. 203  
TAMPA, FL 33605 US

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

LEVY, BUDDY J  
2203 N. LOIS AVE.  
912  
TAMPA, FL 33607 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:

04/26/2004

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 1,000.00

**Amount of Capital Contributions in Florida to date:** 1,000.00

**GENERAL PARTNER INFORMATION:**

Document #:

Name: VALCO GROUP, INC.  
Address: 2109 E. PALM AVE., STE. 203  
City-St-Zip: TAMPA, FL 33605

**ADDRESS CHANGES ONLY:**

Address: 2203 N. LOIS AVE., SUITE 937  
City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN COFFILL

PRES

04/26/2004

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

\_\_\_\_\_  
Date