

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000000186

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** BERT E. ROPER AND BARBARA C. ROPER FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

12302 SUMMERPORT LANE  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

12302 SUMMERPORT LANE  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 59-3420295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ASMA, C. NICK  
884 SOUTH DILLARD STREET  
WINTER GARDEN, FL 347873910 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 #:

Name: ROPER, BERT E TRUSTEE  
Address: 12302 SUMMERPORT LANE  
City-St-Zip: WINDERMERE, FL 34786

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: ROPER, BARBARA C TRUSTEE  
Address: 12302 SUMMERPORT LANE  
City-St-Zip: WINDERMERE, FL 34786

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: BERT E ROPER, TRUSTEE

GP

02/16/2011

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

\_\_\_\_\_  
Date