

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002112

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** THE AVP AND GLP FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

13567 ISLA VISTA DRIVE  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13567 ISLA VISTA DRIVE  
JACKSONVILLE, FL 32224

**New Mailing Address:**

**FEI Number:** 59-3533604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PETERSON, GWENITH L  
13567 ISLA VISTA DRIVE  
JACKSONVILLE, FL 32224 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: PETERSON, GWENITH L  
Address: 13567 ISLA VISTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32224

**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: GWENITH L. PETERSON

GP

04/14/2010

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

\_\_\_\_\_  
Date