

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A99000000706

Entity Name: 5C OF CENTRAL FLORIDA, LLLP

FILED  
Mar 10, 2011  
Secretary of State

**Current Principal Place of Business:**

571 WEST KINGS HIGHWAY  
CENTER HILL, FL 33514

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 399  
CENTER HILL, FL 33514

**New Mailing Address:**

FEI Number: 41-1749149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHEAR, L. DAVID  
401 E. JACKSON STREET, SUITE 2700  
TAMPA, FL 33602 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: CHERNIN, MARSHALL  
Address: 17949 CACHET ISLE DRIVE  
City-St-Zip: TAMPA, FL 33647

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: CHERNIN, ALEX  
Address: 571 W KING HWY  
City-St-Zip: CENTER HILL, FL 33514

Address:  
City-St-Zip:

Document #:

Name: CHERNIN, ADAM  
Address: 571 W KING HWY  
City-St-Zip: CENTER HILL, FL 33514

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: MARSHLL CHERNIN

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

03/10/2011

\_\_\_\_\_  
Date