

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B92000000073

**Entity Name:** ROOT REAL ESTATE ONE, L.P., LTD.

**FILED**  
**Feb 03, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 59-3152593

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VOGES, WILLIAM J  
275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174 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 #: P00000093902  
Name: ROOT REAL ESTATE CORP.  
Address: 275 CLYDE MORRIS BLVD.  
City-St-Zip: ORMOND BEACH, FL 32174  
Document #: M94000000022  
Name: R.D.T., L.L.C.  
Address: 275 CLYDE MORRIS BLVD.  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PHILIP MARONEY

VP

02/03/2009

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

\_\_\_\_\_  
Date