

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001677

**FILED**  
**Feb 15, 2005**  
**Secretary of State**

**Entity Name:** L.K. FAMILY LIMITED PARTNERSHIP, LLLP

**Current Principal Place of Business:**

1410 WINDSOR AVENUE  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 150734  
ALTAMONTE SPRINGS, FL 327150734

**New Mailing Address:**

**FEI Number:** 59-3525721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KOLTUN, JEFFREY M  
557 NORTH WYMORE ROAD, SUITE 100  
MAITLAND, FL 32751 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

**Capital Contributions as Shown on record:** 5,000,000.00

**Amount of Capital Contributions in Florida to date:** 1,330,083.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: IHRIG, DONALD M  
Address: 1410 WINDSOR AVENUE  
City-St-Zip: LONGWOOD, FL 32750

Address:  
City-St-Zip:

Document #:

Name: IHRIG, KATHLEEN K  
Address: 1410 WINDSOR AVENUE  
City-St-Zip: LONGWOOD, FL 32750

Address:  
City-St-Zip:

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:** DONALD M. IHRIG

PTN

02/15/2005

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

\_\_\_\_\_  
Date