

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000001569

**FILED**  
**Mar 26, 2009**  
**Secretary of State**

**Entity Name:** GROUP 3 INVESTMENTS, LLLP

**Current Principal Place of Business:**

1017 FRANKLAND ROAD  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

1414 DISTANT OAKS DR  
WESLEY CHAPEL, FL 33543

**New Mailing Address:**

1017 FRANKLAND ROAD  
TAMPA, FL 33629

**FEI Number:** 36-4562209

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CFRA, LLC  
4221 W. BOY SCOUT BLVD.  
TAMPA, FL 336075736 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: GALLAGHER, GARY E  
Address: 1017 FRANKLAND ROAD  
City-St-Zip: TAMPA, FL 33629

Document #:

Name: ARMSTRONG, WILLIAM M  
Address: 1017 FRANKLAND ROAD  
City-St-Zip: TAMPA, FL 33629

Document #:

Name: DONLAD, THOMAS  
Address: 1017 FRANKLAND ROAD  
City-St-Zip: TAMPA, FL 33629

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: GARY E. GALLAGHER

PRES

03/26/2009

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

\_\_\_\_\_  
Date