2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Jan 19, 2013
Secretary of State
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Entity Name: M.N.S. FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

2645 SOUTH BAYSHORE DRIVE, UNIT 202
COCONUT GROVE, FL 33133

Current Mailing Address:

P.O. BOX 427
BANNER ELK, NC 28604

FEI Number: 03-0423814

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONATHAN H. GREEN & ASSOCIATES, P.A.
799 BRICKELL PLAZA, SUITE 700
MIAMI, FL 33131 US

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 Detail :

Document #	
Name	SCHLEIFER, MARTIN TRUSTEE
Address	2645 SOUTH BAYSHORE DRIVE, UNIT 202
City-State-Zip:	COCONUT GROVE FL 33133

Document #	
Name	SCHLEIFER, NANCY TRUSTEE
Address	P.O. BOX 427
City-State-Zip:	BANNER ELK NC 28604

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY SCHLEIFER 01/19/2013

Electronic Signature of Signing General Partner Detail — Date