

**2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000002467

**Entity Name:** WOOTEN FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

32330 E. TAMIAMI TRAIL  
OCHOPEE, FL 34141

**Current Mailing Address:**

32330 E. TAMIAMI TRAIL  
OCHOPEE, FL 34141

**FEI Number:** 65-0698551

**Certificate of Status Desired:** No

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

SOD, CHRISTOPHER C  
150 S MAIN ST  
LABELLE, FL 33935 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 WOOTEN, S. GENE TRUSTEE

Address 32330 E. TAMIAMI TRAIL

City-State-Zip: OCHOPEE FL 34141

*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:** WOOTEN , S. GENE TRUSTEE

04/04/2013

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

\_\_\_\_\_ Date