

2008 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2008

DOCUMENT # A00000000199

1. Entity Name
ROOD FAMILY LIMITED PARTNERSHIP

08 NOV 14 AM 8:52

TALLAHASSEE FLORIDA

Principal Place of Business

200 PIERCE STREET
STE 2B
TAMPA, FL 33602

Mailing Address

200 PIERCE STREET
STE 2B
TAMPA, FL 33602

02292008 No Chg-LF

GR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3622891Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROOD, EDWARD C
200 PIERCE STREET
STE 2B
TAMPA, FL 33602DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

EDWARD C. Rood

11-3-08
DATEFILE NOW!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00.A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME ROOD, EDWARD B
STREET ADDRESS 200 PIERCE STREET
CITY-ST-ZIP TAMPA, FL 33602DOCUMENT #
NAME ROOD, EDWARD C
STREET ADDRESS 200 PIERCE STREET
CITY-ST-ZIP TAMPA, FL 33602DOCUMENT #
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NAME
STREET ADDRESS
CITY-ST-ZIP

600137110436

11/14/08--01003--033 **100.00

600137110436

10/21/08--01011--009 **900.00

DO NOT WRITE
IN THIS SPACE

L. SELLERS

NOV 17 2008

EXAMINER

STAPLE CHECK HERE

REINSTATEMENT 08

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 629, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

EDWARD C. Rood

10-15-08

J216

Daytime Phone #