

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000000205

**FILED**  
**Mar 03, 2009**  
**Secretary of State**

**Entity Name:** COUNTY MAYO LIMITED PARTNERS

**Current Principal Place of Business:**

C/O CHECKTRAC, INC.  
2933 SOUTH FLORIDA AVE., STE. #4  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CHECKTRAC, INC.  
2933 SOUTH FLORIDA AVE., STE. #4  
LAKELAND, FL 33803

**New Mailing Address:**

**FEI Number:** 74-2951665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHARAR, TOM E  
C/O CHECKTRAC, INC.  
2933 SOUTH FLORIDA AVE., STE. #4  
LAKELAND, FL 33803 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 #: 539447  
Name: CHECKTRAC, INC.  
Address: 2933 SOUTH FLORIDA AVE., STE. #4  
City-St-Zip: LAKELAND, FL 33803

**ADDRESS CHANGES ONLY:**

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:** TOM E. SCHARAR

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

03/03/2009

\_\_\_\_\_  
Date