

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000000299

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** THE NAPLES FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4320 LIVE OAK BOULEVARD  
PALM HARBOR, FL 34685

**New Principal Place of Business:**

**Current Mailing Address:**

4320 LIVE OAK BOULEVARD  
PALM HARBOR, FL 34685

**New Mailing Address:**

FEI Number: 59-3625520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAPLES, JOHN D  
4320 LIVE OAK BOULEVARD  
PALM HARBOR, FL 34685 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: NAPLES, JOHN D  
Address: 4320 LIVE OAK BOULEVARD  
City-St-Zip: PALM HARBOR, FL 34685

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: JOHN D. NAPLES

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

01/04/2011

\_\_\_\_\_ Date