

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000001116

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** FRANKENFIELD FOREIGN COIN EXCHANGE, LTD.

**Current Principal Place of Business:**

14721 SW 67TH AVE  
CORAL GABLES, FL 33158

**New Principal Place of Business:**

**Current Mailing Address:**

334 WEST OLYMPIA AVENUE  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 65-0896355

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRANG, OLSEN & LYNCH, CPAS, P.A.  
334 WEST OLYMPIA AVENUE  
PUNTA GORDA, FL 33950 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: FRANKENFIELD, JOHN R  
Address: 14721 SW 67TH AVE  
City-St-Zip: CORAL GABLES, FL 33158

Address:  
City-St-Zip:

Document #:

Name: FRANKENFIELD, ERIC C  
Address: 14721 SW 67TH AVENUE  
City-St-Zip: CORAL GABLES, FL 33158

Address:  
City-St-Zip:

Document #:

Name: FRANKENFIELD, JOHN C  
Address: 345 FLEMMING AVENUE  
City-St-Zip: GREEN ACRES, FL 33463

Address:  
City-St-Zip:

Document #:

Name: SIEGEL, ARLETTE M  
Address: 13300 ATLANTIC BLVD. APT. #1214  
City-St-Zip: JACKSONVILLE, FL 32225

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: ERIC C FRANKENFIELD

GP

04/25/2011

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

\_\_\_\_\_  
Date