

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000001745

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** WOODBERY FAMILY LIMITED LIABILITY PARTNERSHIP

**Current Principal Place of Business:**

1659 HULL CIRCLE  
ORLANDO, FL 328063177

**New Principal Place of Business:**

**Current Mailing Address:**

900 CROOKED OAK CT  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 59-7196619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLICK, JAMES J  
3700 S. CONWAY RD.  
ORLANDO, FL 32812 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: RICKERSON, DONNA W TRUSTEE  
Address: 1609 FAHNSTOCK STREET  
City-St-Zip: EUSTIS, FL 32726

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: WOODBERY, LOUISE F TRUSTEE  
Address: 1659 HULL CIRCLE  
City-St-Zip: ORLANDO, FL 328063177

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: LOUISE F. WOODBERY

GP

03/20/2012

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

\_\_\_\_\_  
Date