

2007 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A01000000308

1. Entity Name
FARMERS REALTY LIMITED PARTNERSHIP



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL 12 PM 4:20

Principal Place of Business
% HENDERSON KEASLER LAW FIRM
4309 PABLO OAKS COURT, SUITE 5
JACKSONVILLE, FL 32224

Mailing Address
% HENDERSON KEASLER LAW FIRM
4309 PABLO OAKS COURT, SUITE 5
JACKSONVILLE, FL 32224



2. Principal Place of Business - No P.O. Box #
% Keasler Law Firm
Suite, Apt. #, etc.
10407 Centurion Parkway N., Ste. 112

3. Mailing Address
% Keasler Law Firm
Suite, Apt. #, etc.
10407 Centurion Parkway N., Ste. 112

City & State
Jacksonville, FL
Zip
32256
Country
USA

City & State
Jacksonville, FL
Zip
32256
Country
USA

06262007 REIN-LP CR2E100 (1/07)

4. FEI Number
65-1023858
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KEASLER, FRANK R JR
4309 PABLO OAKS COURT, SUITE 5
JACKSONVILLE, FL 32224

7. Name and Address of New Registered Agent

Name
Keasler, Frank R., Jr.
Street Address (P.O. Box Number is Not Acceptable)
10407 Centurion Parkway N., Ste. 112
City
Jacksonville FL Zip Code
32256

8. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

FILE NOW!!! FEE IS \$1000.00

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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
ST. AUGUSTINE LAND TRUST
STREET ADDRESS
4309 PABLO OAKS COURT, SUITE 5
CITY-ST-ZIP
JACKSONVILLE, FL 32224

13. ADDRESS CHANGES ONLY

STREET ADDRESS
10407 Centurion Parkway N., Ste. 112
CITY-ST-ZIP
Jacksonville, FL 32256

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

REINSTATEMENT 2006-07

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 620, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

6/27/07 904-339-0255

STAPLE CHECK HERE