

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000000162

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Entity Name:** HIRSCHAUER FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

9205 POST RD  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

9205 POST RD  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 01-0583122      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

HIRSCHAUER, DAVID R  
9205 POST RD  
ODESSA, FL 33556      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: HIRSCHAUER, DAVID R  
Address: 9205 POST RD  
City-St-Zip: ODESSA, FL 33556

**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: DAVID R HIRSCHAUER

PRES

05/01/2010

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

\_\_\_\_\_  
Date