

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000536

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Entity Name:** THE MICHAEL L. JENKINS FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

227 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32439

**New Principal Place of Business:**

75 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32439

**Current Mailing Address:**

227 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32439

**New Mailing Address:**

75 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32439

**FEI Number:** 04-3732883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JENKINS, MICHAEL L  
227 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32489 US

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

JENKINS, MICHAEL L  
75 BAY GROVE BOULEVARD  
SUITE 1  
FREEPORT, FL 32489 US

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:

03/07/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: JENKINS, MICHAEL L  
Address: 227 BAY GROVE BOULEVARD  
City-St-Zip: FREEPORT, FL 32439

**ADDRESS CHANGES ONLY:**

Address: 75 BAY GROVE BOULEVARD  
City-St-Zip: FREEPORT, FL 32439

Document #:

Name: JENKINS, LAURA DIANE  
Address: 227 BAY GROVE BOULEVARD  
City-St-Zip: FREEPORT, FL 32439

Address: 75 BAY GROVE BOULEVARD  
City-St-Zip: FREEPORT, FL 32439

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: MICHAEL L JENKINS

03/07/2011

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

\_\_\_\_\_  
Date