

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001255

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** LISA SHAW ATKINSON FAMILY, LTD., LLLP

**Current Principal Place of Business:**

2911 S. HIGHWAY 77  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

2911 S. HIGHWAY 77  
LYNN HAVEN, FL 32444 US

**Current Mailing Address:**

2911 S. HIGHWAY 77  
LYNN HAVEN, FL 32444

**New Mailing Address:**

2911 S. HIGHWAY 77  
LYNN HAVEN, FL 32444 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

SCOTT, MICHAEL  
2583 HUNT CLIFF LANE  
PANAMA CITY, FL 32405 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: ATKINSON, LISA SHAW  
Address: 2911 S. HIGHWAY 77  
City-St-Zip: LYNN HAVEN, FL 32444

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip: LYNN HAVEN, FL 32444 US

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: LISA SHAW ATKINSON

GP

04/19/2010

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

\_\_\_\_\_  
Date