

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001292

**FILED**  
**Feb 20, 2008**  
**Secretary of State**

**Entity Name:** THE ROSSITER FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2933 GOLFSIDE DRIVE  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

2933 GOLFSIDE DRIVE  
NAPLES, FL 34110

**New Mailing Address:**

**FEI Number:** 35-2182235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSSITER, WILLIAM T  
2933 GOLFSIDE DRIVE  
NAPLES, FL 34110 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: ROSSITER, WILLIAM T  
Address: 2933 GOLFSIDE DRIVE  
City-St-Zip: NAPLES, FL 34110

Document #:

Name: ROSSITER, TERRY P  
Address: 2933 GOLFSIDE DRIVE  
City-St-Zip: NAPLES, FL 34110

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM T ROSSITER

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

02/20/2008

\_\_\_\_\_  
Date