

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000173

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** AGCMD OFFICE PARTNERSHIP, A FLORIDA LIMITED PARTNERSHIP

**Current Principal Place of Business:**

13801 N. DALE MABRY HWY.  
SUITE 200  
TAMPA, FL 33618 US

**New Principal Place of Business:**

**Current Mailing Address:**

13801 N. DALE MABRY HWY.  
SUITE 200  
TAMPA, FL 33618 US

**New Mailing Address:**

**FEI Number:** 59-3565549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOINS, PHILIP ALLEN  
13801 N. DALE MABRY HWY.  
SUITE 200  
TAMPA, FL 33618 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 #: K39461  
Name: A.G. DEVELOPMENT GROUP, INC.  
Address: 13801 N. DALE MABRY HWY., SUITE 200  
City-St-Zip: TAMPA, FL 33618 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #: P93000052376  
Name: CMD ENTERPRISES, INC.  
Address: 13801 N. DALE MABRY HWY., SUITE 100  
City-St-Zip: TAMPA, FL 33618 US

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: PHILIP ALLEN GOINS

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

01/04/2011

\_\_\_\_\_  
Date