

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000613

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

**Entity Name:** BOWYER FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, RLLP

**Current Principal Place of Business:**

520 SOUTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

520 SOUTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 51-0487391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOWYER, JAMES W  
520 SOUTH MAGNOLIA AVENUE  
ORLANDO, FL 32801 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: BOWYER, JAMES W

Address: 520 SOUTH MAGNOLIA AVENUE

City-St-Zip: ORLANDO, FL 32801

**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: JAMES W BOWYER

GP

03/13/2012

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

\_\_\_\_\_  
Date