

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000000791

**FILED**  
**Apr 28, 2005**  
**Secretary of State**

**Entity Name:** THE WEST COAST FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3056 SW 41ST LANE  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

3056 SW 41ST LANE  
OCALA, FL 34474

**New Mailing Address:**

PO BOX 519  
OCALA, FL 34478

**FEI Number:** 32-0077388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHRISTOPHER C. SANDERS, P.A.  
2837 1ST AVENUE N.  
ST. PETERSBURG, FL 33713 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

**Capital Contributions as Shown on record:** 0.00

**Amount of Capital Contributions in Florida to date:** 0.00

**GENERAL PARTNER INFORMATION:**

**Document #:**

**Name:** JOHNSON, LEONARD W

**Address:** P.O. BOX 76158

**City-St-Zip:** ST. PETERSBURG, FL 33734

**ADDRESS CHANGES ONLY:**

**Address:**

**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** LEONARD W. JOHNSON

**MGR**

**04/28/2005**

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

\_\_\_\_\_  
Date