

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000791

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

1731 SW 2ND AVE. STE C  
OCALA, FL 34477

**New Principal Place of Business:**

1720 SE 16TH AVE BLDG 200  
OCALA, FL 34471

**Current Mailing Address:**

PO BOX 771019  
OCALA, FL 34977

**New Mailing Address:**

**FEI Number:** 32-0077388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, PEDER  
1731 SW 2ND AVE. STE C  
OCALA, FL 34477 US

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

JOHNSON, PEDER  
3220 SE 20TH AVE.  
OCALA, FL 34471 US

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: PEDER L. JOHNSEN

04/29/2010

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P05000073707  
Name: HAMPTON MANOR WEST COAST, INC.  
Address: 1731 SW 2ND AVE. STE C  
City-St-Zip: OCALA, FL 34477

**ADDRESS CHANGES ONLY:**

Address: 1720 SE 16TH AVE BLDG 200  
City-St-Zip: OCALA, FL 34471

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: PEDER L. JOHNSEN

MBR

04/29/2010

Electronic Signature of Signing General Partner

Date