

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000944

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** THE GERALD W. SCHEUBLEIN FAMILY, LLLP

**Current Principal Place of Business:**

18950 FALCON CREST BLVD.  
LAND O'LAKES, FL 34638

**New Principal Place of Business:**

**Current Mailing Address:**

18950 FALCON CREST BLVD.  
LAND O'LAKES, FL 34638

**New Mailing Address:**

**FEI Number:** 54-2118761

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHEUBLEIN, GERALD W  
18950 FALCON CREST BLVD.  
LAND O'LAKES, FL 34638 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: SCHEUBLEIN, GERALD W  
Address: 18950 FALCON CREST BLVD.  
City-St-Zip: LAND O'LAKES, FL 34638

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: SCHEUBLEIN, KAREN  
Address: 18950 FALCON CREST BLVD.  
City-St-Zip: LAND O'LAKES, FL 34638

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: KAREN SCHEUBLEIN

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

04/16/2012

\_\_\_\_\_  
Date