

2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000001162

FILED
Apr 29, 2011
Secretary of State

Entity Name: KULANGARA FAMILY LIMITED PARTNERSHIP I

Current Principal Place of Business:

915 HICKORY FORK DRIVE
SEFFNER, FL 33584 US

New Principal Place of Business:

Current Mailing Address:

915 HICKORY FORK DRIVE
SEFFNER, FL 33584 US

New Mailing Address:

FEI Number: 20-0143968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KULANGARA, JAMES M
915 HICKORY FORK DRIVE
SEFFNER, FL 33584 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: JAMES, JULIA M
Address: 915 HICKORY FORK DR
City-St-Zip: SEFFNER, FL 33584 US

Address:
City-St-Zip:

Document #:

Name: KULANGARA, JAMES M
Address: 915 HICKORY FORK DRIVE
City-St-Zip: SEFFNER, FL 33584 US

Address:
City-St-Zip:

Document #:

Name: JAMES, JENEY S
Address: 915 HICKORY FOR DR
City-St-Zip: SEFFNER, FL 33584 US

Address:
City-St-Zip:

Document #:

Name: JAMES, JEMIE M
Address: 915 HICKORY FOR DR
City-St-Zip: SEFFNER, FL 33584 US

Address:
City-St-Zip:

Document #:

Name: JAMES, JONATHAN M
Address: 915 HICKORY FOR DR
City-St-Zip: SEFFNER, FL 33584 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: JAMES KULANGARA

PRES

04/29/2011

Electronic Signature of Signing General Partner

Date