

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000001322

**FILED**  
**Feb 20, 2007**  
**Secretary of State**

**Entity Name:** REILING FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4351 GULFSHORE BLVD. N.  
6N LERIVAGE  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

3936 TAMIAMI TRAIL NORTH  
SUITE B  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 20-0215346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES R. NICI C/O COX & NICI  
1185 IMMOKALEE ROAD  
SUITE 110  
NAPLES, FL 34110 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 #: P03000080626  
Name: REILING FAMILY ENTERPRISES, INC.  
Address: 4351 GULFSHORE BLVD. N. 6N LE RIVAGE  
City-St-Zip: NAPLES, FL 34103 US

**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 Chapter 119, 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: WILLIAM S. REILING

P

02/20/2007

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

\_\_\_\_\_  
Date