

# **2007 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000001611

**FILED**  
**Jul 02, 2007**  
**Secretary of State**

**Entity Name:** MARTIN FAMILY INVESTMENTS, LTD.

**Current Principal Place of Business:**

545 BRENT LANE  
PENSACOLA, FL 32503

**New Principal Place of Business:**

807 BAYCLIFFS ROAD  
GULF BREEZE, FL 32561

**Current Mailing Address:**

545 BRENT LANE  
PENSACOLA, FL 32503

**New Mailing Address:**

807 BAYCLIFFS ROAD  
GULF BREEZE, FL 32561

**FEI Number:** 59-3594687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTIN, HOWELL J M.D.  
545 BRENT LANE  
PENSACOLA, FL 32503 US

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

MARTIN, HOWELL J M.D.  
807 BAYCLIFFS ROAD  
GULF BREEZE, FL 32561 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: HOWELL J. MARTIN

07/02/2007

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: MARTIN, HOWELL J M.D.

Address: 545 BRENT LANE

City-St-Zip: PENSACOLA, FL 32503

**ADDRESS CHANGES ONLY:**

Address: 807 BAYCLIFFS

City-St-Zip: GULF BREEZE, FL 32561

I hereby certify that the information supplied with this filing does not qualify 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: HOWELL J MARTIN

GP

07/02/2007

Electronic Signature of Signing General Partner

Date