

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A04000001346

FILED
Aug 26, 2009
Secretary of State

Entity Name: SMOKEY ENTERPRISES LIMITED, LLLP

Current Principal Place of Business:

8502 KENTUCKY DERBY DR.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

8502 KENTUCKY DERBY DR.
ODESSA, FL 33556

New Mailing Address:

FEI Number: 20-1471277 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

F & L CORP
ONE INDEPENDENT DRIVE, STE. 1300
JACKSONVILLE, FL 32202 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: CABALE, EMILIANO L
Address: 8502 KENTUCKY DERBY DR.
City-St-Zip: ODESSA, FL 33556

Document #:

Name: CABALE, MATILDE Y
Address: 8502 KENTUCKY DERBY DR.
City-St-Zip: ODESSA, FL 33556

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Address:
City-St-Zip:

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: EMILIANO CABALE

Electronic Signature of Signing General Partner

08/26/2009

Date