

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000000801

**FILED**  
**Jan 06, 2008**  
**Secretary of State**

**Entity Name:** THE MELLON FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3702 N. A1A  
803  
FT. PIERCE, FL 34949

**New Principal Place of Business:**

**Current Mailing Address:**

3702 N. A1A  
803  
FT. PIERCE, FL 34949

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

MELLON, ARTHUR  
3702 N. A1A  
803  
FT. PIERCE, FL 34949 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: MELLON, ARTHUR  
Address: 3702 N. A1A #803  
City-St-Zip: FT. PIERCE, FL 34949  
Document #:  
Name: MELLON, ANDREA I  
Address: 3702 N. A1A #803  
City-St-Zip: FT. PIERCE, FL 34949

**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: ARTHUR MELLON

PTNR

01/06/2008

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

\_\_\_\_\_  
Date