

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001194

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** THE JEAN-BAPTISTE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3051 SW 139TH TERRACE  
DAVIE, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

3051 SW 139TH TERRACE  
DAVIE, FL 33330

**New Mailing Address:**

**FEI Number:** 20-3148076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JEAN-BAPTISTE, JOCELYNE E  
3051 SW 139TH TERRACE  
DAVIE, FL 33330 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: JEAN-BAPTISTE, HARRY J  
Address: 3051 SW 139TH TERRACE  
City-St-Zip: DAVIE, FL 33330

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: JEAN-BAPTISTE, JOCELYNE E  
Address: 3051 SW 139TH TERRACE  
City-St-Zip: DAVIE, FL 33330

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: JOCELYNE JEAN-BAPTISTE

GP

04/12/2011

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

\_\_\_\_\_  
Date