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SECRETARY OF STATE

T. CLINE
DEC 15 2010
EXAMINER

WS-1680

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT: Walk	er-Press Family	Limited Partners	hip
(Name	of Florida Limited Partner	ship or Limited Liability Li	mited Partnership)
The enclosed States	ment of Termination a	nd fee(s) are submitted	for filing.
Please return all co.	rrespondence concerni	ng this matter to:	
Karen Ziegler			
	(Contact Person)		
Lewis, Rice &	Fingersh, L.C.		
	(Firm/Company)		
600 Washingto	on Ave., Ste. 250	00	300 CCC
	(Address)		الله الله الله الله الله الله الله الله
Saint Louis, M	O 63101		1335 1935 1940
	(City, State and Zip Code)		7 S
For further informa	tion concerning this m	atter, please call:	in the second
Karen Ziegler		at (_314) 44	4-1369
(Name of	Contact Person)		Daytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	nations nter Circle	MAILING Registration Division of GP. O. Box 63 Tallahassee,	Section Corporations 327
Tallahassee, FL 32	301		

STATEMENT OF TERMINATION FOR

Walker-Press Family Limited Partnership

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, t	
partnership or limited liability limited partnership, whose certification Boundary Plant of State on 8/30/2005	the was fried with the hereby submits this
Statement of Termination.	<u></u>
The limited partnership or limited liability limited partnership has its affairs and wishes to file a statement of termination.	s completed winding up
Signatures of each general partner or the person appointed pursua s. 620.1803(3) or (4), F.S.:	nt to
s. 620.1803(3) or (4), F.S.:	

Filing Fee: \$52.50 Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75