

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001699

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA ONE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

9350 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 14  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

9350 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 14  
ORLANDO, FL 32837

**New Mailing Address:**

9350 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 14  
ORLANDO, FL 32837

**FEI Number:** 01-0843017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOLLO, CAROL  
9350 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837 US

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

BOLLO, ANTHONY  
313 DUFF DRIVE  
WINTER GARDEN, FL 34787 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: ANTHONY BOLLO

04/28/2010

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: L05000087526  
Name: FLORIDA MANAGEMENT LLC  
Address: 9350 SOUTH ORANGE BLOSSOM TRAIL  
City-St-Zip: ORLANDO, FL 32837

**ADDRESS CHANGES ONLY:**

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: ANTHONY BOLLO

04/28/2010

Electronic Signature of Signing General Partner

Date