

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001699

**FILED**  
**Mar 30, 2012**  
**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:**

875 WYMORE ROAD  
SUITE 101  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 01-0843017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

ABRIOLA, GARY  
875 WYMORE ROAD  
SUITE 101  
ALTAMONTE SPRINGS, FL 32714 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: GARY ABRIOLA

03/30/2012

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: 875 WYMORE ROAD, SUITE 101  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: GARY ABRIOLA

MMGR

03/30/2012

Electronic Signature of Signing General Partner

Date