2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# A05000001916

Entity Name: AGLIANO FAMILY LIMITED PARTNERSHIP, LLP

Current Principal Place of Business:

4922 ST. CROIX DRIVE
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 18621
TAMPA, FL 336798621

New Mailing Address:

FEI Number: 16-1736589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGLIANO, DENNIS S
4922 ST. CROIX DRIVE
TAMPA, FL 33629 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: AGLIANO, DENNIS S TRUSTEE
Address: P.O. BOX 18621
City-St-Zip: TAMPA, FL 336793621
Document #:
Name: AGLIANO, JUDITH P TRUSTEE
Address: 4922 ST. CROIX DRIVE
City-St-Zip: TAMPA, FL 33629

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: DENNIS AGLIANO GP 04/09/2009

Electronic Signature of Signing General Partner — Date