

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000002224

Entity Name: SAINT, LLLP

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1395 STATE ROAD 7  
SUITE 450  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

1395 STATE ROAD 7  
SUITE 450  
WELLINGTON, FL 33414 US

**New Mailing Address:**

FEI Number: 20-5438034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERBST, SETH J M.D.  
1395 STATE ROAD 7  
SUITE 450  
WELLINGTON, FL 33414 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 #: L05000119300  
Name: SAINT GPNER, LLC  
Address: 1395 STATE ROAD 7, SUITE 450  
City-St-Zip: WELLINGTON, FL 33414 US

**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: SETH J HERBST

GPTR

03/05/2012

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

\_\_\_\_\_  
Date