

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A06000000543

**FILED**  
**Feb 13, 2008**  
**Secretary of State**

**Entity Name:** SKS FAMILY LIMITED PARTNERSHIP, LLLP

**Current Principal Place of Business:**

99 NESBIT STREET  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

357 SEVERIN ROAD  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

99 NESBIT STREET  
PUNTA GORDA, FL 33950

**New Mailing Address:**

357 SEVERIN ROAD  
PORT CHARLOTTE, FL 33952

**FEI Number:** 20-4761632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLMES, DAVID A  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US

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

SESHADRI, SASH S  
357 SEVERIN ROAD  
PORT CHARLOTTE, FL 33952 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: SASH S. SESHADRI

02/13/2008

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: SESHADRI, SASH  
Address: 357 SEVERIN ROAD S.E.  
City-St-Zip: PORT CHARLOTTE, FL 33952

**ADDRESS CHANGES ONLY:**

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: SASH S. SESHADRI

MR.

02/13/2008

Electronic Signature of Signing General Partner

Date