

# 2012 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A06000001453

**FILED**  
**Aug 29, 2012**  
**Secretary of State**

**Entity Name:** LEON F MCKINNON FAMILY LIMITED PARTERSHIP

**Current Principal Place of Business:**

102 S. MAIN STREET  
CRESCENT CITY, FL 32112

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1223  
PALATKA, FL 32178

**New Mailing Address:**

210 AZALEA CIRCLE  
PALATKA, FL 32177

FEI Number: 20-8021625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRISON, DAVID A  
379 CHENEY HIGHWAY  
#210  
TITUSVILLE, FL 32780 US

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

MCKINNON, GARY  
210 AZALEA CIRCCKE  
PALATKA, FL 32177 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 MCKINNON

08/29/2012

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: MCKINNON, LEON  
Address: POST OFFICE BOX 1223  
City-St-Zip: PALATKA, FL 32178

**ADDRESS CHANGES ONLY:**

Address: 210 AZALEA CIRCLE  
City-St-Zip: PALATKA, FL 32177

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: LEON MCKINNON

GNPT

08/29/2012

Electronic Signature of Signing General Partner

Date