

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A06000001468

Entity Name: MIKE & TARA ASSOCIATES, LTD.

**FILED**  
**Mar 10, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

1112 KELTON BOULEVARD  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

18 VIA DE LUNA  
UNIT 1406  
PENSACOLA BEACH, FL 32561

**Current Mailing Address:**

1112 KELTON BOULEVARD  
GULF BREEZE, FL 32563

**New Mailing Address:**

PO BOX 160  
GULF BREEZE, FL 32562

FEI Number: 20-8055120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHLOE MANAGEMENT, LLC  
1112 KELTON BOULEVARD  
GULF BREEZE, FL 32563 US

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

CHLOE MANAGEMENT, LLC  
18 VIA DE LUNA  
UNIT 1406  
PENSACOLA BEACH, FL 32561 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: MICHAEL J DOLISTER FOR CHLOE MANAGEMENT

03/10/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: L06000116440  
Name: CHLOE MANAGEMENT, LLC  
Address: 1112 KELTON BOULEVARD  
City-St-Zip: GULF BREEZE, FL 32563

**ADDRESS CHANGES ONLY:**

Address: P.O. BOX 160  
City-St-Zip: GULF BREEZE, FL 32562

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: MICHAEL J DOLISTER FOR CHLOE MANAGEMENT

GP

03/10/2009

Electronic Signature of Signing General Partner

Date