

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07000000449

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** CBM MAGUIRE PROPERTIES, LTD.

**Current Principal Place of Business:**

15717 OAKLAND AVE  
OAKLAND, FL 34760

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 488  
OAKLAND, FL 34760

**New Mailing Address:**

**FEI Number:** 20-8640277

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MITCHELL, JAMES R  
15717 OAKLAND AVE  
OAKLAND, FL 34760 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: CBM MAGUIRE PROPERTIES MANAGEMENT, LLC

Address: PO BOX 488

City-St-Zip: OAKLAND, FL 34760

**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: R JAMES MITCHELL

P

02/17/2012

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

\_\_\_\_\_  
Date