

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000001042

Entity Name: CARMICHAEL FAMILY BUSINESS INTERESTS, LLLP

FILED  
Mar 14, 2011  
Secretary of State

**Current Principal Place of Business:**

6822 22ND AVENUE N. BOX 364  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

6822 22ND AVENUE N. BOX 364  
#364  
ST. PETERSBURG, FL 33710 UN

**Current Mailing Address:**

6822 22ND AVENUE N. BOX 364  
ST. PETERSBURG, FL 33710

**New Mailing Address:**

6822 22ND AVENUE N. BOX 364  
#364  
ST. PETERSBURG, FL 33710 UN

FEI Number: 26-0850547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARMICHAEL, THOMAS W  
12418 1ST STREET WEST  
TREASURE ISLAND, FL 33706 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: CARMICHAEL, THOMAS W  
Address: 6822 22ND AVENUE N. BOX 364  
City-St-Zip: ST. PETERSBURG, FL 33710

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip: ST. PETERSBURG, FL 33710 UN

Document #:

Name: CARMICHAEL, PATRICIA C  
Address: 6822 22ND AVENUE N. BOX 364  
City-St-Zip: ST. PETERSBURG, FL 33710

Address:  
City-St-Zip: ST. PETERSBURG, FL 33710 UN

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: THOMAS W CARMICHAEL

MR

03/14/2011

Electronic Signature of Signing General Partner

Date