

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07000001232

**Entity Name:** MATTHEW & PAULA CARR, LLLP

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

674 W. TROPICAL WAY  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

674 W. TROPICAL WAY  
PLANTATION, FL 33317 US

**New Mailing Address:**

**FEI Number:** 26-1756840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRYE, AUSTIN A  
20900 WEST DIXIE HIGHWAY  
AVENTURA, FL 33180 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: CARR, MATTHEW L TRUSTEE  
Address: 674 W. TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: CARR, PAULA TRUSTEE  
Address: 674 W. TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317 US

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: MATTHEW CARR, TRUSTEE

GP

03/27/2012

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

\_\_\_\_\_  
Date