

# 2008 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A07000001438

1. Entity Name  
MECCA FAMILY PARTNERSHIP, LTD.



FILED

2008 NOV -4 AM 10: 51

Principal Place of Business  
7965 LANTANA ROAD  
LAKE WORTH, FL 33467

Mailing Address  
~~7965 LANTANA ROAD~~  
~~LAKE WORTH, FL 33467~~  
P.O. Box 5417 79  
Lake Worth, FL  
33454

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

10292008 REIN-LP CR2E100 (1/07)

4. FEI Number	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MECCA, THOMAS J  
7965 LANTANA ROAD  
LAKE WORTH, FL 33467

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE Thomas J. Mecca 10-28-08  
Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN) DATE

FILE NOW!!! FEE IS \$500.00  
After January 1, 2009, Fee will be \$1000.00

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L07000123471	STREET ADDRESS	
NAME	L & G MECCA INVESTMENTS, LLC	CITY-ST-ZIP	
STREET ADDRESS	7965 LANTANA ROAD		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 J Mecca 10-28-08 561 793 5436  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE