# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

**FILED**
**Jan 27, 2009**
**Secretary of State**

DOCUMENT# A08000000502

**Entity Name:** C & C FLOYD FAMILY LLLP

**Current Principal Place of Business:**

16475 NE 32 AVE.
NORTH MIAMI BEACH, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

16475 NE 32 AVE.
NORTH MIAMI BEACH, FL 33160 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

RARICK, PHILLIP B
6500 COWPEN RD
SUITE 204
MIAMI LAKES, FL 33014 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: FLOYD, CHARLES
Address: 16475 NE 32 AVE.
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US
Document #:
Name: FLOYD, CHARLOTTE
Address: 16475 NE 32 AVE.
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

**ADDRESS CHANGES ONLY:**

Address:
City-St-Zip:

Address:
City-St-Zip:

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: CHARLES FLOYD GP 01/27/2009
Electronic Signature of Signing General Partner Date