## 2011 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A08000000821

Entity Name: VITOCORE PARTNERS, LLLP

FILED Feb 15, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8826 GOODBY'S EXECUTIVE DRIVE 8826 GOODBY'S EXECUTIVE DRIVE

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 US

Current Mailing Address: New Mailing Address:

8826 GOODBY'S EXECUTIVE DRIVE 8826 GOODBY'S EXECUTIVE DRIVE

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32217 US

FEI Number: 26-3403569 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRANT, ABRAHAM, REITER, MCCORMICK & JOHNSO 50 N. LAURA STREET, SUITE 2750 JACKSONVILLE, FL 32202 US

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

ADDRESS CHANGES ONLY:

## **GENERAL PARTNER INFORMATION:**

Document #:

Name: COHEN, TOMMY D.C.

Address: 6942 SALAMANCA AVENUE Address:

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 US

Document #:

Name: COHEN, VICKI C

Address: 6942 SALAMANCA AVENUE Address:

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 US

Document #:

Name: COHEN, DAVID

Address: 8826 GOODBY'S EXECUTIVE DRIVE, SUITE A Address:

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217 US

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: DAVID COHEN GP 02/15/2011