

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A08000000963

**FILED**  
**Feb 05, 2010**  
**Secretary of State**

**Entity Name:** LAUREL TRACE PARTNERSHIP, LLLP

**Current Principal Place of Business:**

537 LANE AVENUE NORTH  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

537 LANE AVENUE NORTH  
JACKSONVILLE, FL 32254

**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:**

MARY A. ROBISON, ESQUIRE  
FISHER, TOUSEY, LEAS & BALL P.A.  
501 RIVERSIDE AVENUE, SUITE 600  
JACKSONVILLE, FL 32202 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 #: L08000102666  
Name: LAUREL TRACE MANAGER, LLC  
Address: 537 LANE AVENUE NORTH  
City-St-Zip: JACKSONVILLE, FL 32254

**ADDRESS CHANGES ONLY:**

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: KENNETH R. LANE

MGR

02/05/2010

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

\_\_\_\_\_  
Date