

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A10000000811

**FILED**  
**Jan 14, 2012**  
**Secretary of State**

**Entity Name:** HIRAM'S ESTATE FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

609 PINK APARTMENT ROAD  
DAVENPORT, FL 33836

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 24628  
LAKELAND, FL 338024628

**New Mailing Address:**

PO BOX 1034  
DAVENPORT, FL 33837

**FEI Number:** 27-4627382

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ALLEN, PHILIP O  
225 EAST LEMON STREET, SUITE 300  
LAKELAND, FL 33801 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: MOORE, HIRAM V  
Address: 609 PINK APARTMENT ROAD  
City-St-Zip: DAVENPORT, FL 33836

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: MOORE, DOROTHY M  
Address: 609 PINK APARTMENT ROAD  
City-St-Zip: DAVENPORT, FL 33836

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: HIRAM V. MOORE/DOROTHY M. MOORE

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

01/14/2012

\_\_\_\_\_  
Date