

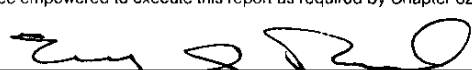


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
APR 24 AM 10:56

DOCUMENT # A22631 1. Entity Name THE PAUL FAMILY LIMITED PARTNERSHIP						STATE DIVISION OF CORPORATIONS APR 24 AM 10:56	
Principal Place of Business 2020 DUNDEE RD. WINTER HAVEN, FL 33884				Mailing Address 2020 DUNDEE RD. WINTER HAVEN, FL 33884			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03232006 Chg-LP CR2E003 (11/05)		4. FEI Number 59-2673491	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		Applied For Not Applicable	
Zip Country		Zip Country					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
PAUL, EUGENE S 2020 DUNDEE RD. WINTER HAVEN, FL 33884				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00							
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 #	NAME			STREET ADDRESS			
STREET ADDRESS	1300 N. LAKE OTIS DR.			CITY - ST - ZIP			
CITY - ST - ZIP	WINTER HAVEN, FL 33880			STREET ADDRESS	600074753406		
DOCUMENT #	NAME			CITY - ST - ZIP	05/17/06 01012 012 **500.00		
STREET ADDRESS	PAUL, J R JR.			STREET ADDRESS			
CITY - ST - ZIP	LIVE OAK LANE			CITY - ST - ZIP			
DOCUMENT #	NAME			STREET ADDRESS			
STREET ADDRESS	PAUL, EUGENE S			CITY - ST - ZIP			
CITY - ST - ZIP	11 LAKE ELOISE LANE			STREET ADDRESS	5701 FT DENAUD ROAD		
DOCUMENT #	NAME			CITY - ST - ZIP	ALVA, FL 33920		
STREET ADDRESS	WINTER HAVEN, FL 33884			STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
DOCUMENT #	NAME			STREET ADDRESS			
STREET ADDRESS	PAUL, BRYAN W			CITY - ST - ZIP			
CITY - ST - ZIP	HIGHWAY 29 SOUTH			STREET ADDRESS			
DOCUMENT #	NAME			CITY - ST - ZIP			
STREET ADDRESS	LABELLE, FL 33975			STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
DOCUMENT #	NAME			STREET ADDRESS			
STREET ADDRESS				CITY - ST - ZIP			
CITY - ST - ZIP				STREET ADDRESS			
DOCUMENT #	NAME			CITY - ST - ZIP			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				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: 				3/23/06 863 299-9906			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER				Date Daytime Phone #			