# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

**FILED**
**Jun 15, 2009**
**Secretary of State**

DOCUMENT# A23026

**Entity Name:** H & L TRUST, LIMITED, LLLP

**Current Principal Place of Business:**

1215 S. ORANGE AVE.
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

1215 S. ORANGE AVE.
BARTOW, FL 33830

**New Mailing Address:**

**FEI Number: 59-2744459** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WILSON DONALD H. JR.
245 CENTRAL AVE. S.
BARTOW, FL 33830 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: FITE, BARBARA W.
Address: 16102 E. LAKE BURREL DR.
City-St-Zip: LUTZ, FL

**ADDRESS CHANGES ONLY:**

Address:
City-St-Zip: LUTZ, FL 33549

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: O. H. WRIGHT MGR 06/15/2009

Electronic Signature of Signing General Partner — Date