

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A26355

FILED
Feb 04, 2009
Secretary of State

Entity Name: MUM FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

68 MAMMOTH GROVE RD.
LAKE WALES, FL 338987330

New Principal Place of Business:

Current Mailing Address:

PO BOX 231
LAKE WALES, FL 338590231

New Mailing Address:

FEI Number: 59-2886342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UPDIKE, LAWRENCE C.
68 MAMMOTH GROVE ROAD
LAKE WALES, FL 33853 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 #: 648901
Name: GINCO, INCORPORATED
Address: 68 MAMMOTH GROVE RD
City-St-Zip: LAKE WALES, FL 338987330

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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: LAWRENCE C. UDPIKE, SR.

TRSR

02/04/2009

Electronic Signature of Signing General Partner

Date