

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A27811

FILED
Jan 06, 2009
Secretary of State

Entity Name: THE THOMAS K. COUGHLIN FAMILY LIMITED PARTNERSHIP-A

Current Principal Place of Business:

141 SAGE BRUSH TRAIL
SUITE A
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

141 SAGE BRUSH TRAIL
SUITE A
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2913881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COUGHLIN, THOMAS K.
141 SAGE BRUSH TRAIL
SUITE A
ORMOND BEACH, FL 32074 US

Name and Address of New Registered Agent:

COUGHLIN, THOMAS K.
141 SAGE BRUSH TRAIL
SUITE A
ORMOND BEACH, FL 32174 US

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

01/06/2009

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: COUGHLIN, THOMAS K.
Address: 141 SAGE BRUSH TR. STE.A
City-St-Zip: ORMOND BEACH, FL

Document #:

Name: COUGHLIN, KATHLEEN N.
Address: 141 SAGE BRUSH TR. STE.A
City-St-Zip: ORMOND BEACH, FL

ADDRESS CHANGES ONLY:

Address:
City-St-Zip: ORMOND BEACH, FL 32174

Address:
City-St-Zip: ORMOND BEACH, FL 32174

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: THOMAS K COUGHLIN

Electronic Signature of Signing General Partner

01/06/2009

Date