

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A92000000275

Entity Name: KICKOFF PARTNERS, LTD.

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

ONE STADIUM PLACE  
JACKSONVILLE, FL 32202

## **New Principal Place of Business:**

ONE EVERBANK FIELD DRIVE  
JACKSONVILLE, FL 32202

## **Current Mailing Address:**

ONE STADIUM PLACE  
JACKSONVILLE, FL 32202

## **New Mailing Address:**

ONE EVERBANK FIELD DRIVE  
JACKSONVILLE, FL 32202

FEI Number: 59-3205911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEAVER, J. WAYNE  
ONE STADIUM PLACE  
JACKSONVILLE, FL 32202 US

## **Name and Address of New Registered Agent:**

WEAVER, J. WAYNE  
ONE EVERBANK FIELD DRIVE  
JACKSONVILLE, FL 32202 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: J. WYANE WEAVER

01/05/2012

Electronic Signature of Registered Agent

Date

## **GENERAL PARTNER INFORMATION:**

Document #:

Name: WEAVER, J W  
Address: ONE STADIUM PLACE  
City-St-Zip: JACKSONVILLE, FL 32202

## **ADDRESS CHANGES ONLY:**

Address: ONE EVERBANK FIELD DRIVE  
City-St-Zip: JACKSONVILLE, FL 32202

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: J. WAYNE WEAVER

GP

01/05/2012

Electronic Signature of Signing General Partner

Date