

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000000251

**FILED**  
**Apr 18, 2008**  
**Secretary of State**

**Entity Name:** THE JIMMY APRILE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

10865 CORY LAKE DR  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

10865 CORY LAKE DR  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 59-3173508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

APRILE, JIMMY V  
10865 CORY LAKE DRIVE  
TAMPA, FL 33647 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: APRILE, JIMMY V  
Address: 10865 CORY LAKE DRIVE  
City-St-Zip: TAMPA, FL 33647

**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: JIMMY V APRILE

GP

04/18/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date