

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000000708

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** THE J. R. PAUL, JR. FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

400 LIVE OAK LANE  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 301  
LABELLE, FL 33935

**New Mailing Address:**

**FEI Number:** 65-0457583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAUL, J R JR  
400 LIVE OAK LANE  
LABELLE, FL 33935 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: PAUL, J R JR  
Address: 400 LIVE OAK LANE  
City-St-Zip: LABELLE, FL 33935

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: PAUL, JOHN R III  
Address: POST OFFICE BOX 301  
City-St-Zip: LABELLE, FL 33975

Address:  
City-St-Zip:

Document #:

Name: PAUL, JULIE S  
Address: 1336 TORREYA CIRCLE  
City-St-Zip: N. FT. MYERS, FL 33917

Address:  
City-St-Zip:

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: JOHN PAUL

PRES

04/18/2011

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

\_\_\_\_\_  
Date