## 2009 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A94000001108

FILED Apr 26, 2009 Secretary of State

Entity Name: MARTHA L. T. WEEKS FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:			New Principal Place of Business:	
257 S.E. AV BELLE GLA	ENUE E DE, FL 33430			
Current Mailing Address:			New Mailing Address:	
P.O. BOX 19 LAKE HARE	57 BOR, FL 33459			
FEI Number: 6	55-0509769 FEI Number App	lied For ( ) Fi	El Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
GANN, JAM 257 S. E. A\ BELLE GLA				
The above r		ement for the purpo	ose of changing its registered	d office or registered agent, or both
SIGNATURI	E:			
	Electronic Signature of R	Registered Agent		Date
GENERAL PARTNER INFORMATION:			ADDRESS CHANGES ONLY:	
Address:	WEEKS, MARTHA L. T. 8 E. CORKSCREW BLVD. LAKE HARBOR, FL 334590008		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: MARTHA L. T. WEEKS OWNE 04/26/2009