2010 LIMITED PARTNERSHIP ANNUAL REPORT

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FILED Apr 30, 2010 Secretary of State

Entity Name: NOLA T. REYNOLDS TRUST FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business: New Principal Place of Business:

257 S.E. AVENUE E 1110 N E 2ND STREET BELLE GLADE, FL 33430 BELLE GLADE, FL 33430

Current Mailing Address: New Mailing Address:

P. O. BOX 114 31 EAST CORKSCREW BLVD. LAKE HARBOR, FL 33459

FEI Number: 65-0509761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GANN, JAMES M
257 S.E. AVENUE E
BELLE GLADE, FL 33430 US
LOHMANN, JERRY R
1110 N E 2ND STREET
BELLE GLADE, FL 33430 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: JERRY R LOHMANN 04/30/2010

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

Name: WEEKS, MARTHA L.T. TRUSTEE

Address: P.O. BOX 157, 8 EAST CORKSCREW BLVD. Address: City-St-Zip: LAKE HARBOR, FL 33459 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: MARTHA L T WEEKS TRUS 04/30/2010