

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000001198

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** THE WETMORE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

603 BARRY PLACE  
INDIAN ROCKS BCH, FL 346353106

**New Principal Place of Business:**

**Current Mailing Address:**

603 BARRY PLACE  
INDIAN ROCKS BCH, FL 346353106

**New Mailing Address:**

**FEI Number:** 59-3264076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WETMORE, DEE  
603 BARRY PLACE  
INDIAN ROCKS BCH, FL 346353106 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: WETMORE, DEE

Address: 603 BARRY PLACE

City-St-Zip: INDIAN ROCKS BEACH, FL 34635

**ADDRESS CHANGES ONLY:**

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: DEE WETMORE

GP

03/15/2011

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

\_\_\_\_\_  
Date