

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000001542

**FILED**  
**Mar 17, 2010**  
**Secretary of State**

**Entity Name:** BRENT D. SCHLAPPER FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

234 CROOKED TREE TRAIL  
DELAND, FL 327243432

**New Principal Place of Business:**

**Current Mailing Address:**

234 CROOKED TREE TRAIL  
DELAND, FL 327243432

**New Mailing Address:**

**FEI Number:** 59-6284286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHLAPPER, BRENT D  
234 CROOKED TREE TRAIL  
DELAND, FL 327243432 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: SCHLAPPER, BRENT D  
Address: 234 CROOKED TREE TRAIL  
City-St-Zip: DELAND, FL 327243432

**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: BRENT D SCHLAPPER

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

03/17/2010

\_\_\_\_\_  
Date