

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000000461

**FILED**  
**Apr 22, 2009**  
**Secretary of State**

**Entity Name:** LAUREL ENTERPRISES, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

139 W. CONNIE LEE CT.  
LAKELAND, FL 338092259

**New Principal Place of Business:**

619 MORGAN ROAD  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

P.O. BOX 91085  
LAKELAND, FL 33804

**New Mailing Address:**

**FEI Number:** 59-3310081

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TARA FINANCIAL SERVICES, INC.  
139 CONNIE LEE CT.  
LAKELAND, FL 33809 US

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

DECUBELLIS, STEPHEN JR.  
619 MORGAN ROAD  
WINTER HAVEN, FL 33880 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: STEPHEN DECUBELLIS, JR.

04/22/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: DECUBELLIS, STEPHEN JR

Address: 139 CONNIE LEE COURT

City-St-Zip: LAKELAND, FL 33809

**ADDRESS CHANGES ONLY:**

Address: 619 MORGAN ROAD

City-St-Zip: WINTER HAVEN, FL 33880

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: STEPHEN DECUBELLIS, JR.

04/22/2009

Electronic Signature of Signing General Partner

Date