

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000001198

**Entity Name:** GOLD FAMILY PARTNERSHIP, LTD.

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

LORI AND LEWIS GOLD  
2512 PRINCETON COURT  
WESTON, FL 33327

**New Principal Place of Business:**

LORI AND LEWIS GOLD  
7204 QUEENFERRY CIRCLE  
BOCA RATON, FL 33496

**Current Mailing Address:**

LORI AND LEWIS GOLD  
2512 PRINCETON COURT  
WESTON, FL 33327

**New Mailing Address:**

LORI AND LEWIS GOLD  
7204 QUEENFERRY CIRCLE  
BOCA RATON, FL 33496

**FEI Number:** 65-0603002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLD, LEWIS D M.D.  
2512 PRINCETON COURT  
WESTON, FL 33327 US

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

GOLD, LEWIS D M.D.  
7204 QUEENFERRY CIRCLE  
BOCA RATON, FL 33496 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/03/2012

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: GOLD, LEWIS D M.D.  
Address: 2512 PRINCETON COURT  
City-St-Zip: WESTON, FL 33327

**ADDRESS CHANGES ONLY:**

Address: 7204 QUEENFERRY CIRCLE  
City-St-Zip: BOCA RATON, FL 33496

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: LEWIS GOLD

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

01/03/2012

\_\_\_\_\_  
Date