

**2009 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Feb 27, 2009  
Secretary of State**

DOCUMENT# A95000002005

**Entity Name:** CHARLES M. NOVOTA FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1801 E. JACKSON ST.  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 88  
GULF BREEZE, FL 32562

**New Mailing Address:**

**FEI Number:** 65-0661354      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NOVOTA, CHARLES M  
1801 E. JACKSON ST.  
PENSACOLA, FL 32501      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: NOVOTA, CHARLES M TRUSTEE  
Address: 1801 E. JACKSON ST.  
City-St-Zip: PENSACOLA, FL 32501

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: CHARLES M. NOVOTA

TRUS

02/27/2009

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

\_\_\_\_\_  
Date