

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000002005

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**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 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

04/01/2011

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

\_\_\_\_\_  
Date