

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A95000002092

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

**Entity Name:** SANMARTIN FARMS LIMITED PARTNERSHIP

**Current Principal Place of Business:**

9123 N. MILITARY TR., SUITE 200  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

9123 N. MILITARY TR., SUITE 200  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

**FEI Number:** 59-3436362      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BRAICH, FLORIAN  
9123 N. MILITARY TR., SUITE 200  
PALM BEACH GARDENS, FL 33410      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: BRAICH, FLORIAN  
Address: 9123 N. MILITARY TR., SUITE 200  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**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: F BRAICH DDS

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

PTR

04/27/2009

\_\_\_\_\_  
Date