

2013 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A96000001051

FILED
Dec 05, 2013
Secretary of State

Entity Name: SLOAN FAMILY PARTNERSHIP, LTD.

Current Principal Place of Business:

350 SE 69TH PLACE
OCALA, FL 34480

New Principal Place of Business:

1515 INDIANA AVE.
PALM HARBOR, FL 34683

Current Mailing Address:

350 SE 69TH PLACE
OCALA, FL 34480

New Mailing Address:

1515 INDIANA AVE.
PALM HARBOR, FL 34683

FEI Number: 59-3407692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SLOAN, ETHELMAE
350 SE 69TH PLACE
OCALA, FL 34480 US

Name and Address of New Registered Agent:

HOMAN, LYNNE
1515 INDIANA AVENUE
PALM HARBOR, FL 34683 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: LYNNE HOMAN

12/05/2013

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: SLOAN, JAMES D
Address: 455 8TH AVENUE
City-St-Zip: LABELLE, FL 33935

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Document #:

Name: HOMAN, LYNNE
Address: 1515 INDIANA AVENUE
City-St-Zip: PALM HARBOR, FL 34683

Address:
City-St-Zip:

Document #:

Name: HIGEL, LEE ANNE
Address: 5210 RIVER PARK VILLAS DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32092

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: LYNNE HOMAN

12/05/2013

Electronic Signature of Signing General Partner

Date