

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000001889

**FILED**  
**May 01, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

C/O JOSEPH J. NOLAN, P.A.  
1674 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOSEPH J. NOLAN, P.A.  
1674 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803

**New Mailing Address:**

**FEI Number:** 59-3404090      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

NOLAN, JOSEPH J  
1674 WILLIAMSBURG SQUARE  
LAKELAND, FL 33803      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: NOLAN, JOSEPH J  
Address: 1674 WILLIAMSBURG SQUARE  
City-St-Zip: LAKELAND, FL 33803

**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: JOSEPH J NOLAN

GP

05/01/2010

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

\_\_\_\_\_  
Date