

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000002110

**FILED**  
**Apr 08, 2009**  
**Secretary of State**

**Entity Name:** KALLMAN FAMILY PARTNERS, L.L.L.P.

**Current Principal Place of Business:**

2811 N.W. 58TH BLVD.  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

2811 N.W. 58TH BLVD.  
GAINESVILLE, FL 32606

**New Mailing Address:**

**FEI Number:** 59-3431563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KALLMAN, CLAYTON H  
2811 N.W. 58TH BLVD.  
GAINESVILLE, FL 32606 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: KALLMAN, CLAYTON H  
Address: 2811 N.W. 58TH BLVD.  
City-St-Zip: GAINESVILLE, FL 32606

Document #:

Name: KALLMAN, LINDA  
Address: 2811 N.W. 58TH BLVD.  
City-St-Zip: GAINESVILLE, FL 32606

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: KALLMAN CLAYTON H

GP

04/08/2009

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

\_\_\_\_\_  
Date