


**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**FILED**  
**Mar 04, 2004 08:00 AM**  
**Secretary of State**

|  |   |
|--|---|
| <b>DOCUMENT # A96000002158</b>                     |  |
| 1. Entity Name<br>SANSING FAMILY PARTNERSHIP, LTD. |   |

|   |   |
|---|---|
| Principal Place of Business<br>4875 MANOLETE ST.<br>PENSACOLA, FL 32504 | Mailing Address<br>4875 MANOLETE ST.<br>PENSACOLA, FL 32504 |
|---|---|



|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| City & State                   | City & State        |
| Zip                            | Country             |

|   |                                |                 |
|---|--------------------------------|-----------------|
| 01192004  | Chg-LP                         | CR2E003 (10/03) |
| 4. FEI Number<br>59-3418211                               | Applied For<br>Not Applicable  |                 |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |                 |

|   |  |  |          |
|---|--|--|----------|
| 6. Name and Address of Current Registered Agent               |  | 7. Name and Address of New Registered Agent        |          |
| SANSING, ROBERT C<br>4875 MANOLETE ST.<br>PENSACOLA, FL 32504 |  | Name   |          |
|   |  | Street Address (P.O. Box Number is Not Acceptable) |          |
|   |  | City   |          |
|   |  | FL   | Zip Code |

8. 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. I am familiar with, and accept the obligations of registered agent.

|  |      |
|--|------|
| SIGNATURE  | DATE |
| <small>Signature, typed or printed name of registered agent, and title if applicable</small> |      |

|   |  |
|---|--|
| 9. Capital Contributions as Shown on record. \$784,000.00 | 10. Amount of Capital Contributions in FLORIDA to date. 526.25 |
|---|--|

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

| 12. GENERAL PARTNER INFORMATION |                     | 13. ADDRESS CHANGES ONLY |  |
|---------------------------------|---------------------|--------------------------|--|
| DOCUMENT #                      | NAME                | STREET ADDRESS           |  |
|                                 | SANSING, ROBERT C   |                          |  |
| STREET ADDRESS                  | 4875 MANOLETE ST.   | CITY-ST-ZIP              |  |
|                                 | PENSACOLA, FL 32504 |                          |  |
| DOCUMENT #                      | NAME                | STREET ADDRESS           |  |
|                                 | SANSING, PEGGY L    |                          |  |
| STREET ADDRESS                  | 4875 MANOLETE ST.   | CITY-ST-ZIP              |  |
|                                 | PENSACOLA, FL 32504 |                          |  |
| DOCUMENT #                      | NAME                | STREET ADDRESS           |  |
|                                 |                     |                          |  |
| STREET ADDRESS                  |                     | CITY-ST-ZIP              |  |
|                                 |                     |                          |  |
| DOCUMENT #                      | NAME                | STREET ADDRESS           |  |
|                                 |                     |                          |  |
| STREET ADDRESS                  |                     | CITY-ST-ZIP              |  |
|                                 |                     |                          |  |
| DOCUMENT #                      | NAME                | STREET ADDRESS           |  |
|                                 |                     |                          |  |
| STREET ADDRESS                  |                     | CITY-ST-ZIP              |  |
|                                 |                     |                          |  |

U00000087304  
03/15/04-80005-025 526.25

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Robert C. Sansing</i>   | Robert C. Sansing ✓ | 2/27/04                        |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> |                     | <small>Date</small>            |
|   |                     | <small>Daytime Phone #</small> |