

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000002399

FILED  
Apr 02, 2009  
Secretary of State

**Entity Name:** ZINK FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

8230 BROADWAY AVENUE EAST  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

8230 BROADWAY AVENUE EAST  
TAMPA, FL 33619

**New Mailing Address:**

FEI Number: 59-3416169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZINK, TIMOTHY A  
8230 BROADWAY AVE EAST  
TAMPA, FL 33619 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: ZINK, JAMES A  
Address: 5119 ROLLING FAIRWAY DRIVE  
City-St-Zip: VALRICO, FL 33594

Document #:

Name: ZINK, LYNETTE H  
Address: 5119 ROLLING FAIRWAY DRIVE  
City-St-Zip: VALRICO, FL 33594

**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: TIMOTHY A ZINK

VP

04/02/2009

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

\_\_\_\_\_  
Date