

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A96000002486

**FILED**  
**Feb 26, 2009**  
**Secretary of State**

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

**Current Principal Place of Business:**

7937 PINE LAKE ROAD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 2603 SHADES CLIFF CIRCLE  
JASPER, AL 35504

**New Mailing Address:**

**FEI Number:** 59-3421847

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRANT, ABRAHAM, REITER & MCCORMICK PA  
50 NORTH LAURA STREET, SUITE 3100  
JACKSONVILLE, FL 32202 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 #: P96000102945  
Name: BAXTER ENTERPRISES OF NORTH FLORIDA, INC.  
Address: 2603 SHADES CLIFF CIRCLE  
City-St-Zip: JASPER, AL 35504

**ADDRESS CHANGES ONLY:**

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: LIONEL F BAXTER JR

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

02/26/2009

\_\_\_\_\_  
Date