

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A970000000003

**FILED**  
**Feb 12, 2009**  
**Secretary of State**

**Entity Name:** MALOOF FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

6671 - 13TH AVENUE NORTH  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

10 PARADISE LANE  
TREASURE ISLAND, FL 33706

**Current Mailing Address:**

P.O. BOX 40621  
ST. PETERSBURG, FL 33743

**New Mailing Address:**

10 PARADISE LANE  
TREASURE ISLAND, FL 33706

**FEI Number:** 59-3421452

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MALOOF, EDWARD K  
10 PARADISE LN.  
TREASURE ISLAND, FL 33706 US

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

MALOOF, EDWARD K  
10 PARADISE LANE  
TREASURE ISLAND, FL 33706 US

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:

02/12/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P00000000884  
Name: E. K. MALOOF, INC.  
Address: 6671 - 13TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

**ADDRESS CHANGES ONLY:**

Address: 10 PARADISE LANE  
City-St-Zip: TREASURE ISLAND, FL 33706

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: EDWARD K. MALOOF

PRES

02/12/2009

Electronic Signature of Signing General Partner

Date