2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# A97000000768

Entity Name: STUMP FAMILY PARTNERSHIP, LTD.

Current Principal Place of Business:

1199 BESSENT ROAD
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13445
TALLAHASSEE, FL 323173446

New Mailing Address:

FEI Number: 59-3439175 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMSON, W. FREDERICK
812 GREENBRIER LANE
TALLAHASSEE, FL 32308 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: THOMSON, W. FREDERICK
Address: 3375-G CAPITAL CIRCLEM NE
City-St-Zip: TALLAHASSEE, FL 32308
Document #:
Name: WOMACK, EVELYN
Address: P.O. BOX 700
City-St-Zip: STARKE, FL 32091

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: W/ FREDERICK THOMSON GP 01/13/2009

Electronic Signature of Signing General Partner — Date