2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001461

Name:

Address:

City-St-Zip:

Entity Name: GELLERMAN FAMILY LTD.

GELLERMAN, PEARL 12831 CORAL LAKES DRIVE

BOYNTON BEACH, FL 33437

FILED Jan 12, 2009 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|----------------------------------|------------------------------------|---|--|
| 12831 CORAL LAKES D | RIVE | New Fillicipal Flace | or Busiliess. | |
| BOYNTON BEACH, FL | 33437 | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 12831 CORAL LAKES D BOYNTON BEACH, FL | = | | | |
| FEI Number: 65-0776999 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| PASTOR, PEARL 12831 CORAL LAKES D BOYNTON BEACH, FL | · · · · - | | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both | |
| SIGNATURE: | | | | |
| Electror | nic Signature of Registered Age | ent | Date | |
| GENERAL PARTNER INFORMATION: | | ADDRESS CHANGES ONL | Y: | |
| Document #: | | | | |

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: PEARL GELLERMAN PTNR 01/12/2009