

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000001525

Entity Name: FEDPOM SC COMPANY, LTD.

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

925 SOUTH FEDERALHWY  
SUITE 425  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 11229  
KNOXVILLE, TN 37939

**New Mailing Address:**

FEI Number: 58-2337877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALTERS, CLIFFORD L  
BLALOCK, LANDERS, WALTERS & VOGLER, P.A.  
802 - 11TH ST. WEST  
BRADENTON, FL 34205 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 #: P07000059499  
Name: FEDPOM CORPORATE, INC.  
Address: 925 SOUTH FEDERAL HWY STE 425  
City-St-Zip: BOCA RATON, FL 33432

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: FEDPOM CORPORATE INC

GP

03/15/2011

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

\_\_\_\_\_  
Date