

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000002712

**FILED**  
**Mar 14, 2009**  
**Secretary of State**

**Entity Name:** VON THRON FAMILY PARTNERS, LTD.

**Current Principal Place of Business:**

529 SOUTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

529 SOUTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**New Mailing Address:**

**FEI Number:** 59-3479343

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VON THRON, JOSEPH C  
529 SOUTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931 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: VON THRON, JOSEPH C  
Address: 529 SOUTH ATLANTIC AVENUE  
City-St-Zip: COCOA BEACH, FL 32931

Document #:

Name: VON THRON, JANE  
Address: 529 SOUTH ATLANTIC AVENUE  
City-St-Zip: COCOA BEACH, FL 32931

**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: JOSEPH C. VON THRON

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

03/14/2009

\_\_\_\_\_  
Date