

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 APR 25 AM 10:42

**DOCUMENT # A98000000651**

1. Entity Name  
**BELISLE FAMILY, LTD.**



Principal Place of Business  
**2501 NORTH ORIENT RD., STE. D  
 TAMPA, FL 33619**

Mailing Address  
**2501 NORTH ORIENT RD., STE. D  
 TAMPA, FL 33619**



2. Principal Place of Business - No P.O. Box #  
**1501 S. Alexander St.**

3. Mailing Address  
**1501 S. Alexander St.**

Suite, Apt. #, etc.  
**Suite 101**

Suite, Apt. #, etc.  
**Suite 101**

City & State  
**Plant City, FL**

City & State  
**Plant City, FL**

Zip  
**33563**

Country  
**USA**

Zip  
**33563**

Country  
**USA**

02192008 Chg-LP CR2E003 (12/06)

4. FEI Number  
**59-3484819**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**BELISLE, M R  
 2501 NORTH ORIENT RD., STE. D  
 TAMPA, FL 33619**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)  
**1501 S. Alexander St.**

Suite 101

City

**Plant City,**

**FL**

Zip Code

**33563**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

**M. R. Belisle**

**4-21-08**

DATE

**FILE NOW!!! FEE IS \$500.00  
 After May 1, 2008, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
 NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **P97000068881**  
 NAME **BELCO INVESTMENT COMPANY**  
 STREET ADDRESS **2501 NORTH ORIENT RD, STE D/% M R BELISLE**  
 CITY-ST-ZIP **TAMPA, FL 33619**

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS **1501 S. Alexander St., Suite 101**  
 CITY-ST-ZIP **Plant City, FL 33563**

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS  
 CITY-ST-ZIP

**200125589852  
 04/24/08--01044--003 \*\*500.00**

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STREET ADDRESS  
 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**M. R. Belisle**

Date

**813-754-6400**

Daytime Phone #

STAPLE CHECK HERE