

2009 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A98000000927

FILED
Oct 22, 2009
Secretary of State

Entity Name: WEST FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

3414 HANCOCK BRIDGE PKWY PH3E
FT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

3414 HANCOCK BRIDGE PKWY PH3E
FT MYERS, FL 33903

New Mailing Address:

FEI Number: 65-0832176 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

EMERICH, GUY S ESQ.
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: WEST, JAMES D
Address: 3414 HANCOCK BRIDGE PKWY PH3E
City-St-Zip: FT MYERS, FL 33903

Document #:

Name: WEST, VIOLA M
Address: 3414 HANCOCK BRIDGE PKWY PH3E
City-St-Zip: FT MYERS, FL 33903

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: JAMES D WEST, VIOLA M WEST

Electronic Signature of Signing General Partner

10/22/2009

Date