

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000001571

**FILED**  
**Mar 09, 2009**  
**Secretary of State**

**Entity Name:** GOODMAN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

8801 SCENIC HWY.  
PENSACOLA, FL 325148268

**New Principal Place of Business:**

**Current Mailing Address:**

8801 SCENIC HWY.  
PENSACOLA, FL 325148268

**New Mailing Address:**

**FEI Number:** 65-0850466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOODMAN, EVELYN  
6245 SW 117 TERRACE  
MIAMI, FL 33156 US

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

GOODMAN, EVELYN  
8801 SCENIC HIGHWAY  
PENSACOLA, FL 32514 US

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:

03/09/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P98000057461  
Name: GOODMAN GENERAL PARTNER, INC.  
Address: 8801 SCENIC HWY.  
City-St-Zip: PENSACOLA, FL 325148268

**ADDRESS CHANGES ONLY:**

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: EVELYN GOODMAN

03/09/2009

Electronic Signature of Signing General Partner

Date