

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000001749

**FILED**  
**Mar 12, 2008**  
**Secretary of State**

**Entity Name:** DENNIS B. THOMPSON FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

1309 LANE CIRCLE EAST  
JACKSONVILLE, FL 32254 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8779  
FLEMING ISLAND, FL 32006 US

**New Mailing Address:**

**FEI Number:** 59-3524053

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONTEGA BUSINESS SERVICES, LLC  
ONE INDEPENDENT DRIVE  
SUITE 1200  
JACKSONVILLE, FL 32202 US

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

CONTEGA BUSINESS SERVICES, LLC  
154 LOMAX STREET  
JACKSONVILLE, FL 32204 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:** CHRISTIAN COX PREJEAN, VP

03/12/2008

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

**Document #:** P97000070070  
**Name:** THOMPSON FAMILY PARTNERS, INC.  
**Address:** 1309 LANE CIRCLE EAST  
**City-St-Zip:** JACKSONVILLE, FL 32254 US

**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:** DENNIS B. THOMPSON, SR.

03/12/2008

Electronic Signature of Signing General Partner

Date