

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002114

**FILED**  
**Apr 24, 2008**  
**Secretary of State**

**Entity Name:** THE AURELIA MCKINNEY FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

8448 GOOSE POND ROAD  
ONA, FL 33865

**New Principal Place of Business:**

**Current Mailing Address:**

3080 CR 665  
ONA, FL 33865

**New Mailing Address:**

**FEI Number:** 65-0869987

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AURELIA LORRAINE SMITH  
3080 COUNTY ROAD 665  
ONA, FL 33865 US

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

SMITH, AURELIA L RA GP  
3080 COUNTY ROAD 665  
ONA, FL 33865 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: AURELIA LORRAINE SMITH

04/24/2008

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: LORRAINE SMITH, AURELIA

Address: 3080 CR 665

City-St-Zip: ONA, FL 33865

**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: AURELIA LORRAINE SMITH

GP

04/24/2008

Electronic Signature of Signing General Partner

Date