

# **2009 LIMITED PARTNERSHIP REINSTATEMENT**

DOCUMENT# A98000002375

**FILED**  
**Nov 14, 2009**  
**Secretary of State**

**Entity Name:** N.D. KING FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

43215 STATE RD 70 E  
MYAKKA CITY, FL 34251

**New Principal Place of Business:**

6018 WATERWOOD TRAIL  
BARTOW, FL 33830

**Current Mailing Address:**

P.O. BOX 37  
MYAKKA CITY, FL 34251

**New Mailing Address:**

P.O BOX 5767  
LAKELAND, FL 33807

**FEI Number:** 65-0865099      **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:**

LANCASTER, JOHN J  
500 S FLORIDA AVENUE  
SUITE 800  
LAKELAND, FL 33801 US

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

KING, MICHAEL L  
6018 WATERWOOD TRAIL  
BARTOW, FL 33830 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: LEWIS KING

11/14/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: KING, MICHAEL L  
Address: P.O. BOX 37  
City-St-Zip: MYAKKA CITY, FL 34251

**ADDRESS CHANGES ONLY:**

Address: P.O. BOX 5767  
City-St-Zip: LAKELAND, FL 33807

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: LEWIS KING

GP

11/14/2009

Electronic Signature of Signing General Partner

Date