

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002781

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** OLSEN FAMILY PARTNERSHIP V, LLLP

**Current Principal Place of Business:**

2600 W. BLACK DIAMOND CIRCLE  
LECANTO, FL 34461

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2050  
LECANTO, FL 34460

**New Mailing Address:**

**FEI Number:** 59-3557084

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, MARINA C  
2600 W. BLACK DIAMOND CIRCLE  
LECANTO, FL 34461 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 #: L04000093799  
Name: OLSEN FAMILY INVESTMENTS, LC  
Address: 2600 W. BLACK DIAMOND CIRCLE  
City-St-Zip: LECANTO, FL 34461

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: BRUCE A. OLSEN

MGRM

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date