

2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000002791

FILED
Apr 06, 2011
Secretary of State

Entity Name: SCABAROZI FAMILY PARTNERSHIP, LLLP

Current Principal Place of Business:

8515 N. ATLANTIC AVENUE
OFFICE LOT#26
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

8515 N. ATLANTIC AVENUE
OFFICE LOT#26
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 59-3540651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, JONI S
8515 N. ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

MITCHELL, JONI S
8515 N. ATLANTIC AVENUE #26
CAPE CANAVERAL, FL 32920 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: _____

Electronic Signature of Registered Agent

04/06/2011

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: DAUNNO, GILIA S
Address: 1837 CLARIDGE COURT
City-St-Zip: MAITLAND, FL 32751

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Document #:

Name: MITCHELL, JONI S TRUSTEE
Address: 8515 N. ATLANTIC AVENUE OFFICE #26
City-St-Zip: CAPE CANAVERAL, FL 32920

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: JONI S MITCHELL

MS

04/06/2011

Electronic Signature of Signing General Partner

Date