

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002824

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** ARTHUR C. AND DORIS G. BUTLER FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

393 NW OVERFLOW LAKE DRIVE  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

393 NW OVERFLOW LAKE DRIVE  
LAKE CITY, FL 32055 US

**New Mailing Address:**

**FEI Number:** 59-3557542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BROWN, TOM W  
116 NW COLUMBIA AVENUE  
LAKE CITY, FL 32055 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 #:

Name: BROWN, ANN B  
Address: 393 NW OVERFLOW LAKE DRIVE  
City-St-Zip: LAKE CITY, FL 32055

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: BUTLER, JR., ARTHUR C  
Address: 318 SW HARMONY LN  
City-St-Zip: LAKE CITY, FL 32025

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: ANN B. BROWN

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

03/19/2012

\_\_\_\_\_  
Date