

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002865

**FILED**  
**Mar 27, 2009**  
**Secretary of State**

**Entity Name:** LOFTIN FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

2101 BARRANCAS  
PENSACOLA, FL 32501

**New Principal Place of Business:**

2101 BARRANCAS  
PENSACOLA, FL 32502

**Current Mailing Address:**

2101 BARRANCAS  
PENSACOLA, FL 32501

**New Mailing Address:**

2101 BARRANCAS  
PENSACOLA, FL 32502

**FEI Number:** 59-3548683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOFTIN, JOE M  
2101 BARRANCAS  
PENSACOLA, FL 32501 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 #: P98000096172  
Name: LOFTIN FAMILY COMPANY  
Address: 2101 BARRANCAS  
City-St-Zip: PENSACOLA, FL 32501

**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: JOE M LOFTIN

RA

03/27/2009

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

\_\_\_\_\_  
Date