

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002884

**Entity Name:** SOUTH TROPICAL TRAIL, LTD.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

MARY EVELYN MILEY  
5255 S. TROPICAL TRAIL  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: MARY EVELYN MILEY  
929 CASEY COVE DRIVE  
NOKOMIS, FL 34275

**New Mailing Address:**

MARY EVELYN MILEY  
5255 S. TROPICAL TRAIL  
MERRITT ISLAND, FL 32952

**FEI Number:** 59-3554282

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCMASTER, JAMES D  
6797 S TROPICAL TRAIL  
MERRITT ISLAND, FL 32952 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 #: P98000023787  
Name: SOUTH TROPICAL TRAIL, INC.  
Address: 5255 SOUTH TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

**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: MARY EVELYN GUYTON MILEY

PRES

04/20/2011

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

\_\_\_\_\_  
Date