

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A99000000878

**FILED**  
**Jan 30, 2009**  
**Secretary of State**

**Entity Name:** THE STAPLES FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

**FEI Number:** 65-0924177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FHS CORPORATE SERVICES, INC.  
11780 U.S. HIGHWAY ONE, SUITE 300  
NORTH PALM BEACH, FL 33408 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: STAPLES, ALVA TERRY  
Address: 215 ST. PAUL STREET, #290  
City-St-Zip: DENVER, CO 80206

Document #:

Name: ARMS, SUSAN S  
Address: 1206 RIVER ROAD (BOX 168)  
City-St-Zip: OLD MYSTIC, CT 06372

Document #:

Name: DONALD, ANDREA S  
Address: 93 MAIN STREET  
City-St-Zip: FARMINGTON, CT 06032

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

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: SUSAN S. ARMS

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

01/30/2009

\_\_\_\_\_  
Date