

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A99000001524

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** BAROUDI FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3222 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

3222 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

**FEI Number:** 65-0970300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAROUDI, ISSA F MD  
3222 TAMIAMI TR  
PORT CHARLOTTE, FL 33952 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: BAROUDI, ISSA F  
Address: 2 TROPICANA DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: BAROUDI, LINA  
Address: 2 TROPICANA DRIVE  
City-St-Zip: PUNTA GORDA, FL 33950

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: ISSA F BAROUDI

GP

04/11/2012

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

\_\_\_\_\_  
Date