

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B02000000157

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Entity Name:** BALLAST POINT VENTURES EF, L.P.

**Current Principal Place of Business:**

880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

**Current Mailing Address:**

880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716

**New Mailing Address:**

**FEI Number:** 32-0013856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAHAM, DREW A  
880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716 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 #:** B02000000145  
**Name:** BALLAST POINT VENTURE PARTNERS, L.P.  
**Address:** 880 CARILLON PARKWAY  
**City-St-Zip:** ST. PETERSBURG, FL 33716

**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:** CAROL BEAR

ADM

02/23/2012

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

\_\_\_\_\_  
Date