

2006 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # B03000000165

1. Entity Name
AAM FAMILY LIMITED PARTNERSHIP



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 14 AM 10:57

Principal Place of Business
11 NORTH MAIN STREET
BROOKSVILLE, FL 34601

Mailing Address
11 NORTH MAIN STREET
BROOKSVILLE, FL 34601

2. Principal Place of Business

3. Mailing Address

P O Box 578

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Brooksville FL

Zip

Country

Zip
34605

Country
US

09192006 REIN-LP CR2E100 (11/05)

4. FEI Number
59-3340961

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUCKNER, ROBERT A
11 NORTH MAIN STREET
BROOKSVILLE, FL 34601

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable: (REGISTERED AGENT MUST SIGN)

DATE

FILE NOW!!! FEE IS \$500.00
After January 1, 2007, Fee will be \$1000.00

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P95000076878
NAME MCKETHAN HOLDINGS INC.
STREET ADDRESS 11 NORTH MAIN STREET
CITY-ST-ZIP BROOKSVILLE, FL 34601

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CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Robert A. Buckner, Pres, Mckethan Holdings Inc, General Partner

9/19/06

352-796-4544

STAPLE CHECK HERE