

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B04000000378

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Entity Name:** FOWLER, RODRIGUEZ, VALDES-FAULI, FLINT, GRAY, MCCOY, SULLIVAN AND CARROLL LLLP

**Current Principal Place of Business:**

400 POYDRAS STREET, 30TH FLOOR  
NEW ORLEANS, LA 70130 US

**New Principal Place of Business:**

400 POYDRAS STREET  
30TH FLOOR  
NEW ORLEANS, LA 70130 US

**Current Mailing Address:**

355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 72-1113170      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

REGISTERED AGENT CORPORATE SERVICES INC  
355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 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: FOWLER, GEORGE J III  
Address: 400 POYDRAS STREET, 30TH FLOOR  
City-St-Zip: NEW ORLEANS, LA 70130

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: RODRIGUEZ, ANTONIO J  
Address: 400 POYDRAS STREET, 30TH FLOOR  
City-St-Zip: NEW ORLEANS, LA 70130

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: ANTONIO J. RODRIGUEZ

GP

03/22/2010

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

\_\_\_\_\_  
Date