

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B06000000409

FILED
Mar 04, 2009
Secretary of State

Entity Name: J. MILTON FAMILY PARTNERS, LLLP

Current Principal Place of Business:

8730 NW 36 AVENUE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

8730 NW 36 AVENUE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 20-2769162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKER, REX M
3211 PONCE DE LEON BLVD #301
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: MILTON, CECIL
Address: 8730 NW 36 AVENUE
City-St-Zip: MIAMI, FL 33147

Document #:

Name: MILTON, FRANK
Address: 3211 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

Document #:

Name: MILTON, JOSEPH
Address: 3211 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

Document #:

Name: MILTON, JOSE
Address: 3211 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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: CECIL MILTON

GP

03/04/2009

Electronic Signature of Signing General Partner

Date