

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B10000000147

Entity Name: MASTER PROTECTION, LP

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

ONE TOWN CENTER RD  
BOCA RATON, FL 33486

**New Principal Place of Business:**

ONE TOWN CENTER ROAD  
BOCA RATON, FL 33486

**Current Mailing Address:**

ONE TOWN CENTER RD  
BOCA RATON, FL 33486

**New Mailing Address:**

ONE TOWN CENTER ROAD  
BOCA RATON, FL 33486

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 #: M07000004307  
Name: GRINNELL LLC  
Address: ONE TOWN CENTER RD  
City-St-Zip: BOCA RATON, FL 33486

**ADDRESS CHANGES ONLY:**

Address: ONE TOWN CENTER ROAD  
City-St-Zip: BOCA RATON, FL 33486

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: ANNE MEYER

POA

04/08/2011

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

\_\_\_\_\_  
Date