

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 APR -1 AM 10:56

DOCUMENT # B96000000364

1. Entity Name
CATRON FAMILY LIMITED PARTNERSHIP



Principal Place of Business
110 PADGETT STREET
CORBIN, KY 40701

Mailing Address
110 PADGETT STREET
CORBIN, KY 40701

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01272005 Chg-LP CR2E003 (10/03)

4. FEI Number
61-1308001

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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. \$0.00

10. Amount of Capital Contributions in FLORIDA to date.

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 #
NAME JANIE GRIFFIN CATRON
STREET ADDRESS 110 PADGETT STREET
CITY-ST-ZIP CORBIN, KY 40701

STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Janie G. Catron, Gen Partner 3/30/05

305-509-1994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE