

2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000002315

Entity Name: MCCALL FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Current Principal Place of Business:

5045 WESTSHORE DRIVE
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5045 WESTSHORE DRIVE
NEW PORT RICHEY, FL 34652

FEI Number: 20-4253159

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ICARD, MERRILL, CULLIS, ET AL
ATTN: F. THOMAS HOPKINS
2033 MAIN STREET, SUITE 600
SARASOTA, FL 34237 US

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 Detail :

Document #

Name MILLER, MARGARET MTRUSTEE

Address 5045 WESTSHORE DRIVE

City-State-Zip: NEW PORT RICHEY FL 34652

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARGARET MILLER

PARTNER

03/25/2013

Electronic Signature of Signing General Partner Detail

Date