

**2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07000000043

**Entity Name:** DENNIS L. MURPHY FAMILY LIMITED LIABILITY LIMITED  
PARTNERSHIP NO. 2

**FILED**  
**Jan 30, 2013**  
**Secretary of State**  
**CC1571687467**

**Current Principal Place of Business:**

4625 U.S. HWY 19  
NEW PORT RICHEY, FL 34652-4943

**Current Mailing Address:**

4625 U.S. HWY 19  
NEW PORT RICHEY, FL 34652-4943 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

MURPHY, DENNIS L  
4625 U.S. HWY 19  
NEW PORT RICHEY, FL 34652-4943 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 MURPHY, DENNIS L

Address 4625 U.S. HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652-4943

*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: DENNIS L MURPHY

PRESIDENT

01/30/2013

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

\_\_\_\_\_  
Date