FILED Feb 21, 2008 08:00 A Secretary of State

2008 LIMITED PAR Due l	FILED Feb 21, 2008 08:				
DOCUMENT # A16258 1. Entity Name HILLSIDE, LTD.				Sec:	retary of S
Principal Place of Business 516 LAKEVIEW RD. UNIT 8	Maining Address 516 LAKEVIEW RD. UNIT 8				
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The second real measurements in the Archive and		returned takelijini i Proje	1	X	\$8.75 Additional Fee Required
	Current Registered Agent		handari Gazariya digiriya waxaya ay dan iya iya	a di Switz	and the second of the second of the second
FLYNN, THOMAS F 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756-3302			DO NOT W	RIT	

DO NOT WRITE IN THIS SPACE

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

nazadzio on**m**44-011 508.75

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

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.

i	12.	12. GENERAL PARTNER INFORMATION				
	DOCUMENT & NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT & NAME STREET ADDRESS CITY-ST-ZIP	P98000081536 HILLSIDE ONE OF DUNNELLON, INC. 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 337563302				
	DOCUMENT # NAME STREET ADDRESS PLOTS - VID					
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP					
	EXECUMENT # NAME STREET ADDRESS CITY-ST-789	,				
	DOCUMENT # NAME STREET ADDRESS CUY-ST-ZIP					

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an angang ah mang diginag menggunag sa mengang bermanan diginag diginag diginag diginag diginag diginag digina ing ang sagar sa sa ang pagkan kalang pagkan ang mang pagkan ang mang mang pagkan ang mang mang pagkan ang man

ala ngan meralangan kelakan kepikan kepikan dan dan beradah an menindalangan dilatah anah dalah dalah dalah di 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNETS VICE-President of

Kevin T Flynn

02/15/08

727-449-1182

Daytime Phone #