

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000002847

Entity Name: SHADDIX COMMUNITIES, LTD.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129

New Principal Place of Business:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 US

Current Mailing Address:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129

New Mailing Address:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 US

FEI Number: 59-1524120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, SHARLENE S
686 FERNCLIFF DRIVE
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

FOX, SHARLENE S
4000 S. CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 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:

02/04/2009

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: SHADDIX, WILLIAM S

Address: 1275 BEVILLE ROAD

City-St-Zip: DAYTONA BEACH, FL 32119

Document #:

Name: FOX, SHARLENE S

Address: 4000 SOUTH CLYDE MORRIS BLVD

City-St-Zip: PORT ORANGE, FL 32129

ADDRESS CHANGES ONLY:

Address:

City-St-Zip:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: SHARLENE S. FOX

02/04/2009

Electronic Signature of Signing General Partner

Date