2010 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Mar 09, 2010
Secretary of State

DOCUMENT# A97000002847

Entity Name: SHADDIX COMMUNITIES, LTD.

Current Principal Place of Business:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 US

New Principal Place of Business:

Current Mailing Address:

4000 SOUTH CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 US

New Mailing Address:

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
4000 S. CLYDE MORRIS BLVD
PORT ORANGE, FL 32129 US

Name and Address of New Registered Agent:

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 INFORMATION:

Document #:
Name: SHADDIX COMMUNITIES GENERAL TWO, LLC
Address: 4000 SOUTH CLYDE MORRIS BLVD
City-St-Zip: PORT ORANGE, FL 32129 US

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 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 03/09/2010

Electronic Signature of Signing General Partner Date