

2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A08713

Entity Name: SOUTH WIND, LTD.

Current Principal Place of Business:

550 WATER STREET, SUITE 1230
JACKSONVILLE, FL 32202

Current Mailing Address:

P.O. BOX 610
MONTICELLO, FL 32345

FEI Number: 59-2080630

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CECILIA BRYANT, P.A.
550 WATER STREET, SUITE 1230
JACKSONVILLE, FL 32202 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 BRYANT, CECILIA

Address 550 WATER STREET, SUITE 1230

City-State-Zip: JACKSONVILLE FL 32202

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: CECILIA BRYANT

GP

02/17/2014

Electronic Signature of Signing General Partner Detail

Date