

2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A08713

Entity Name: SOUTH WIND, LTD.

Current Principal Place of Business:

4339 ORTEGA FOREST DR.
JACKSONVILLE, FL 32210

Current Mailing Address:

P.O. BOX 2260
TALLAHASSEE, FL 32210 US

FEI Number: 59-2080630

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CECILIA BRYANT, P.A.
4339 ORTEGA FOREST DR.
JACKSONVILLE, FL 32210 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 4339 ORTEGA FOREST DR.

City-State-Zip: JACKSONVILLE FL 32210

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

02/04/2016

Electronic Signature of Signing General Partner Detail

Date