

2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A10000000201

Entity Name: HOMESTEAD CABIN LIMITED PARTNERSHIP

Current Principal Place of Business:

C/O KELLY, PASSIDOMO & ALBA, LLP
2390 TAMIAMI TRAIL NORTH, SUITE 204
NAPLES, FL 34103

Current Mailing Address:

C/O KELLY, PASSIDOMO & ALBA, LLP
2390 TAMIAMI TRAIL NORTH, SUITE 204
NAPLES, FL 34103

FEI Number: 27-1752226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, CHARLES MJR.
2390 TAMIAMI TRAIL NORTH, SUITE 204
NAPLES, FL 34103 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 DW ANDERSON MANAGEMENT, LLC

Address 2390 TAMIAMI TRAIL NORTH, STE.
204

City-State-Zip: NAPLES FL 34103

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: DW MANAGEMENT LLC

MANAGER

01/11/2017

Electronic Signature of Signing General Partner Detail

Date