

**2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A29807

**Entity Name:** WINDY PINES APARTMENTS, LTD.

**Current Principal Place of Business:**

6650 103RD STREET  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

6650 103RD STREET  
JACKSONVILLE, FL 32210

**FEI Number: 59-3003453**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BHIDE, VASANT P.  
6650 103RD STREET  
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 BHIDE, VASANT P.  
Address 13510 MANDARIN RD.  
City-State-Zip: JACKSONVILLE FL 32223

Document #  
Name BHIDE, CAROL C.  
Address 13510 MANDARIN RD.  
City-State-Zip: JACKSONVILLE FL 32223

*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: ANGIE SHEARER**

**OFFICE MANAGER**

**04/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date