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. 01/22/2017

SIGNATURE: WILLIAM B. HADDEN

Electronic Signature of Signing General Partner Detail

Current Mailing Address:

201 SOUTH NARCISSUS, #603 WEST PALM BEACH. FL 33401

FEI Number: 65-0740567

Name and Address of Current Registered Agent:

ENGELBERG, MORRIS ESQ. 3800 S OCEAN DR, #217 HOLLYWOOD, FL 33019 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:

General Partner Detail :

Document #		Document #	
Name	HADDEN, WILLIAM B	Name	WILLIAM B HADDEN TRUST U/WOF LOUISE F HADD
Address	201 S NARCISSUS AVE., APT, 603	L	
	,	Address	201 S NARCISSUS AVE #603
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip	W PALM BEACH FL 33401

Electronic Signature of Registered Agent

2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A9700000725

Entity Name: HADDEN FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

201 SOUTH NARCISSUS, #603 WEST PALM BEACH. FL 33401

Secretary of State CC4664700824

FILED Jan 22, 2017

Certificate of Status Desired: No

Date

Date

GENERAL PARTNER