## 2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000002429

Entity Name: SHIELDS FAMILY R.L.L.P.

**Current Principal Place of Business:** 

3294 SPRUCE CREEK GLEN PORT ORANGE. FL 32128

**Current Mailing Address:** 

3294 SPRUCE CREEK GLEN PORT ORANGE. FL 32128 US

FEI Number: 59-3551668 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIELDS, DANNIE J. SR. 3294 SPRUCE CREEK GLEN PORT ORANGE, FL 32128 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: DANNIE J. SHIELDS. SR. 03/19/2015

Electronic Signature of Registered Agent

**General Partner Detail:** 

Document # Document #

NameSHIELDS, TOMMY DNameSHIELDS, MARY KATHRYNAddress103 ENGLEWOOD DRAddress7808 CLIFFS EDGE CT.City-State-Zip:INMAN SC 29349City-State-Zip:LOUISVILLE KY 40241

Document #

Name SHIELDS, DANNIE JSR.

Address 3294 SPRUCE CREEK GLEN

City-State-Zip: PORT ORANGE FL 32128

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: DANNIE J. SHIELDS, SR.

MANAGING PARTNER

03/19/2015

Date

FILED Mar 19, 2015

**Secretary of State** 

CC2048060125