

2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000002429

**FILED
Feb 06, 2014
Secretary of State
CC0455940296**

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 JSR.
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: _____

Electronic Signature of Registered Agent

_____ Date

General Partner Detail :

Document #

Name SHIELDS, TOMMY D
Address 103 ENGLEWOOD DR
City-State-Zip: INMAN SC 29349

Document #

Name SHIELDS, MARY KATHRYN
Address 7808 CLIFFS EDGE CT.
City-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.

GP

02/06/2014

Electronic Signature of Signing General Partner Detail

Date