

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000000307

**FILED**  
**Jan 22, 2009**  
**Secretary of State**

**Entity Name:** BULL HAMMOCK RANCH, LTD.

**Current Principal Place of Business:**

160 LAMONT ROAD  
FT. PIERCE, FL 34947

**New Principal Place of Business:**

3658 ELEVEN MILE ROAD  
FT. PIERCE, FL 34945

**Current Mailing Address:**

160 LAMONT ROAD  
FT. PIERCE, FL 34947

**New Mailing Address:**

3658 ELEVEN MILE ROAD  
FT. PIERCE, FL 34945

**FEI Number:** 65-0184364

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARLTON, MARGARET H  
160 LAMONT ROAD  
FT. PIERCE, FL 34947 US

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

CARLTON, MARGARET H  
3658 ELEVEN MILE ROAD  
FT. PIERCE, FL 34945 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: MARGARET H. CARLTON

01/22/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: L01000005156  
Name: BULL HAMMOCK PROPERTY MANAGEMENT, L.C.  
Address: 160 LAMONT ROAD  
City-St-Zip: FT. PIERCE, FL 34947

**ADDRESS CHANGES ONLY:**

Address: 3658 ELEVEN MILE ROAD  
City-St-Zip: FT. PIERCE, FL 34945

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: MARGARET H. CARLTON

01/22/2009

Electronic Signature of Signing General Partner

Date