

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000001363

**FILED**  
**Apr 23, 2009**  
**Secretary of State**

**Entity Name:** HAWKFIELDS FARMS P-2 LIMITED PARTNERSHIP

**Current Principal Place of Business:**

6510 NORTHWEST 9TH BLVD.  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

16401 S W 15 AVENUE  
NEWBERRY, FL 32669

**Current Mailing Address:**

6510 NORTHWEST 9TH BLVD.  
GAINESVILLE, FL 32605

**New Mailing Address:**

8224 S W 28TH PLACE  
GAINESVILLE, FL 32608

**FEI Number:** 25-2820828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOPMAN, JONATHAN E ESQ.  
3001 TAMiami TRAIL NORTH, 4TH FLOOR  
NAPLES, FL 34101 US

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

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 INFORMATION:**

Document #:

Name: HAWKFIELDS L-2 MANAGEMENT LLC

Address: 6510 NORTHWEST 9TH BLVD.

City-St-Zip: GAINESVILLE, FL 32605

**ADDRESS CHANGES ONLY:**

Address: 8224 S W 28TH PLACE

City-St-Zip: GAINESVILLE, FL 32608

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: VIRGINIA J CAUTHEN

MGR

04/23/2009

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

\_\_\_\_\_  
Date