

A020000000709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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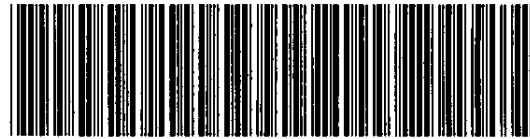
(Business Entity Name)

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T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CADWELL FAMILY PROPERTIES, LTD.

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A02000000709

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

G. BARRY WILKINSON

Contact Person

G. BARRY WILKINSON, P.A.

Firm/Company

P. O. BOX 8102

Address

MADEIRA BEACH, FL 33738-8102

City, State and Zip Code

GBARRYW@TAMPABAY.RR.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

G. BARRY WILKINSON

Name of Contact Person

at (727)

823-1514

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2014

G. BARRY WILKINSON, P.A.
PO BOX 8102
MADEIRA BEACH, FL 33738-8102

SUBJECT: CADWELL FAMILY PROPERTIES, LTD.
Ref. Number: A02000000709

We have received your document for CADWELL FAMILY PROPERTIES, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 914A00023299

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. CADWELL FAMILY PROPERTIES, LTD.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 05/10/2002
Date of filing/registration in Florida

3. A02000000709
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

WILKINSON, G. BARRY
Name
696 FIRST AVENUE NORTH, SUITE 201
Address
ST. PETERSBURG, FL 33701
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

WILKINSON, G. BARRY
Name
8283 27TH AVENUE NORTH
Florida street address (P.O. Box not acceptable)
ST. PETERSBURG FL 33710
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Jim David Manago
Signature of General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11-5-14
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA