

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000166

**Entity Name:** ADAMS MANAGEMENT USA, LTD.

**FILED**  
**Jan 06, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

540 BILTMORE WAY  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

540 BILTMORE WAY  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 81-0594759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADAMS, JOHN C  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 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 #: P03000012440  
Name: ADAMS MANAGEMENT USA, INC.  
Address: 540 BILTMORE WAY  
City-St-Zip: CORAL GABLES, FL 33134 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: JOHN C. ADAMS

GP

01/06/2009

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

\_\_\_\_\_  
Date