

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000001279

FILED
Mar 20, 2009
Secretary of State

Entity Name: RUST FAMILY PARTNERSHIP I, LTD.

Current Principal Place of Business:

C/O REGISTER & COMPANY, P.A.
2600 DOUGLAS RD., STE. 604
CORAL GABLES, FL 33134

New Principal Place of Business:

C/O REGISTER & COMPANY, P.A.
2600 S. DOUGLAS RD., STE. 604
CORAL GABLES, FL 331346100

Current Mailing Address:

C/O REGISTER & COMPANY, P.A.
2600 DOUGLAS RD., STE. 604
CORAL GABLES, FL 33134

New Mailing Address:

C/O REGISTER & COMPANY, P.A.
2600 S. DOUGLAS RD., STE. 604
CORAL GABLES, FL 331346100

FEI Number: 65-0302014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, SHARON Q
C/O STEARNS WEAVER MILLER ET. AL
150 W. FLAGLER ST., STE. 2400
MIAMI, FL 33130 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 #: L03000033061
Name: RUST FAMILY ENTERPRISES, LLC
Address: 2600 DOUGLAS RD., STE. 604
City-St-Zip: CORAL GABLES, FL 33130

ADDRESS CHANGES ONLY:

Address: 2600 S. DOUGLAS RD., STE. 604
City-St-Zip: CORAL GABLES, FL 331346100

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: ROBERT W. RUST FOR RUST FAMILY ENTERPRISES

03/20/2009

Electronic Signature of Signing General Partner

Date