

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03268

FILED
Jul 07, 2009
Secretary of State

Entity Name: MONCRIEF VILLAGE APARTMENTS LIMITED

Current Principal Place of Business:

4000 B ST. JOHNS AVE.
STE 22
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

4000 B ST. JOHNS AVE.
STE 22
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1425200 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

WALTON, WILLIAM H JR
4000 B ST. JOHNS AVE.
STE 22
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

WALTON, ALONZO D
4000 B ST. JOHNS AVE.
STE 22
JACKSONVILLE, FL 32205 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: ALONZO WALTON

07/07/2009

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: WALTON, WILLIAM H.,JR.

Address: 3811 MCGIRTS BLVD.

City-St-Zip: JACKSONVILLE, FL

Document #: L07000107281

Name: PARTNERSHIP MANAGER, L.L.C.

Address: 4000-B ST. JOHN'S AVENUE, SUITE 22

City-St-Zip: JACKSONVILLE, FL 32205

ADDRESS CHANGES ONLY:

Address:

City-St-Zip:

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: ALONZO WALTON

MGR

07/07/2009

Electronic Signature of Signing General Partner

Date