2009 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# A05000001023

Entity Name: FLARADA FAMILY PARTNERSHIP, LTD.

Current Principal Place of Business:

8844 S.W. 12TH ROAD
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

8844 S.W. 12TH ROAD
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOLF, MICHAEL A
8844 S.W. 12TH ROAD
GAINESVILLE, FL 32607 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 #: L05000049206
Name: WOLFMAW MANAGEMENT, LLC
Address: 8844 S.W. 12TH ROAD
City-St-Zip: GAINESVILLE, FL 32607

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: MICHAEL ALLAN WOLF 04/21/2009

Electronic Signature of Signing General Partner — Date