## 2010 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A0600000191

Entity Name: LONGFELLOW APARTMENTS, LLLP

8159 KNIGHTSBRIDGE LANE

MENTOR, OH 44060

Address:

City-St-Zip:

FILED Jan 06, 2010 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
2799 BOCA RATON BLVD., SUITE 116 BOCA RATON, FL 33431			2800 EUCLID AVE #300 CLEVELAND, OH 44115	2800 EUCLID AVE #300 CLEVELAND, OH 44115	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
6219 COSTA LAKE POINT FLOWERY BRANCH, GA 30542			2800 EUCLID AVE #300 CLEVELAND, OH 44115	2800 EUCLID AVE #300 CLEVELAND, OH 44115	
FEI Number:	20-8195089	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
KINCHEN, ELIZABETH J 2622 NW 49TH ST. BOCA RATON, FL 33434 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:  Electronic Signature of Registered Agent  Date					
GENERAL PARTNER INFORMATION:			ADDRESS CHANGES ONLY:	ADDRESS CHANGES ONLY:	
Document #: Name: Address: City-St-Zip:	KINCHEN, GILBE 6219 COSTA LAK FLOWERY BRAN	(E POINT	Address: City-St-Zip:		
Document #: Name: Address: City-St-Zip:	ROSEN, HARVEY 3 HAVERHILL LAI BEACHWOOD, O	NE	Address: City-St-Zip:		
Document #: Name:	DROBNICK, NAN	CY			

I hereby 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.

Address:

City-St-Zip:

SIGNATURE: HARVEY S ROSEN 01/06/2010