

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A08745

Entity Name: ST. AUGUSTINE VILLAGE, LTD.

**FILED**  
**Apr 10, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256 US

**Current Mailing Address:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256

**New Mailing Address:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256 US

FEI Number: 59-2015770

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SILVERFIELD, GARY D.  
7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256 US

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

SILVERFIELD, GARY D.  
10175 FORTUNE PARKWAY, SUITE 1005  
JACKSONVILLE, FL 32256 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:

04/10/2009

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: SILVERFIELD, GARY D.  
Address: 7865 SOUTHSIDE BLVD  
City-St-Zip: JACKSONVILLE, FL

**ADDRESS CHANGES ONLY:**

Address: 10175 FORTUNE PARKWAY, SUITE 1005  
City-St-Zip: JACKSONVILLE, FL 32256 US

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: KAREN J. SELIGMAN

MGR

04/10/2009

Electronic Signature of Signing General Partner

Date