

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A10000000627

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** HOUSING CERTIFICATE HOLDING COMPANY, LLLP

**Current Principal Place of Business:**

650 S NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 US

**New Principal Place of Business:**

**Current Mailing Address:**

650 S NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 US

**New Mailing Address:**

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

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

LECESSE DEVELOPMENT CORP.  
650 S. NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 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 #: A10000000568  
Name: LECESSE KEYS, LLLP  
Address: 650 S NORTHLAKE BOULEVARD, SUITE 450  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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.

SIGNATURE: LECESSE KEYS LLLP

\_\_\_\_\_ Electronic Signature of Signing General Partner

01/04/2011

\_\_\_\_\_ Date