

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A11132

FILED
Apr 29, 2009
Secretary of State

Entity Name: SOUTHSIDE APARTMENTS OF MARIANNA, LTD.

Current Principal Place of Business:

P. O. BOX 610
MONTICELLO, FL 32345

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 610
MONTICELLO, FL 32345

New Mailing Address:

FEI Number: 59-2122383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLIVE, W. ROBERT
101 NORTH MONROE ST.
SUITE 900
TALLAHASSEE, FL 32301 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 #:

Name: MILLER, WILTON R.
Address: 101 NORTH MONROE STREET, SUITE 900
City-St-Zip: TALLAHASSEE, FL 32301

Document #:

Name: OLIVE, W. ROBERT, JR
Address: 101 NORTH MONROE STREET, SUITE 900
City-St-Zip: TALLAHASSEE, FL 32301

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: W. ROBERT OLIVE

GP

04/29/2009

Electronic Signature of Signing General Partner

Date