

**2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A24015

**FILED  
Mar 07, 2009  
Secretary of State**

**Entity Name:** ZION JACKSONVILLE LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4630 FIELDSTONE RD.  
RIVERDALE, NY 10471

**New Principal Place of Business:**

**Current Mailing Address:**

4630 FIELDSTONE RD.  
RIVERDALE, NY 10471

**New Mailing Address:**

**FEI Number:** 13-3382119      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ZION, ABRAHAM  
%ZION JACKSONVILLE LIMITED PARTNERSHIP  
9469 EASTPORT ROAD  
JACKSONVILLE, FL 32218 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: ZION, ABRAHAM  
Address: 4630 FIELDSTONE RD.  
City-St-Zip: RIVERDALE, NY

**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: ABRAHIM ZION

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

G.PA

03/07/2009

\_\_\_\_\_ Date