2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A9600000074

Entity Name: SHELDON COVE, LLLP

400 IMPERIAL BLVD

CAPE CANAVERAL, FL 32920

Address: City-St-Zip: FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
400 IMPER CAPE CAN	IAL BLVD IAVERAL, FL	32920			
Current Mailing Address:			New Mailing Address:		
PO BOX 90 CAPE CAN	002 IAVERAL, FL	32920			
FEI Number:	59-3370034	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MAYS, WIL 400 IMPER CAPE CAN		32920 US			
The above in the State		submits this statement for the	purpose of changing its registered	office or registered agent, or both	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
GENERAL PARTNER INFORMATION:			ADDRESS CHANGES ONLY	ADDRESS CHANGES ONLY:	
Document #: Name: Address: City-St-Zip: Document #: Name:	MAYS, WILLIAM 400 IMPERIAL CAPE CANAVEI MAYS, BERCHI	BLVD RAL, FL 32920	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: WILLIAM R. MAYS MGR 01/15/2009