

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000002248

FILED
Mar 23, 2009
Secretary of State

Entity Name: THE HAGGARD FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

330 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

330 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0864750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGGARD, WILLIAM A ESQ.
330 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134 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: HAGGARD, MARJORIE T TRUSTEE

Address: 330 ALHAMBRA CIRCLE

City-St-Zip: CORAL GABLES, FL 33134

Document #:

Name: HAGGARD, WILLIAM A

Address: 330 ALHAMBRA CIRCLE

City-St-Zip: CORAL GABLES, FL 33134

Document #:

Name: HOLDCRAFT, PATRICIA H

Address: 6036 FALCONBRIDGE PLACE

City-St-Zip: MOUNT DORA, FL 32757

ADDRESS CHANGES ONLY:

Address:

City-St-Zip:

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: /S/ WILLIAM A. HAGGARD

Electronic Signature of Signing General Partner

03/23/2009

Date