

**2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A00000000899

**Entity Name:** TOMLINSON FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3700 LEAFY WAY  
MIAMI, FL 33133

**Current Mailing Address:**

3700 LEAFY WAY  
MIAMI, FL 33133

**FEI Number:** 65-1064288

**Certificate of Status Desired:** No

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

CORPCO, INC.  
2699 S. BAYSHORE DRIVE, 7TH FL  
MIAMI, FL 33133 US

*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 Detail :**

Document #

Name TOMLINSON, MALCOLM J

Address 3700 LEAFY WAY

City-State-Zip: COCONUT GROVE FL 33133

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MALCOLM JOHN TOMLINSON

**PRESIDENT**

**02/15/2017**

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

\_\_\_\_\_  
Date