# 2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000001167

Entity Name: SAXON TRACE PARTNERS, LTD.

# **Current Principal Place of Business:**

1920 MAIN STREET SUITE 150 IRVINE, CA 92614

# **Current Mailing Address:**

1920 MAIN STREET SUITE 150 IRVINE, CA 92614 US

### FEI Number: 51-0427606

# Name and Address of Current Registered Agent:

CSC (CORPORATION SERVICE COMPANY) 1201 HAYS STREET TALLAHASSEE, FL 32301 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: KATRINA KOENIG

Electronic Signature of Registered Agent

# General Partner Detail :

Document #

 
 Name
 AVANATH SAXON TRACE GP, LLC

 Address
 1920 MAIN STREET SUITE 150

 City-State-Zip:
 IRVINE CA 92614

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: CHERAY SMITH

Electronic Signature of Signing General Partner Detail

Certificate of Status Desired: No

02/01/2024

Date

02/01/2024 Date

VP, CORPORATE TAX