

**2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000001694

**Entity Name:** SUNNILAND FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

7305 STATE ROAD 29 SOUTH  
IMMOKALEE, FL 34142

**Current Mailing Address:**

P.O. BOX 930  
IMMOKALEE, FL 34143

**FEI Number:** 20-1804591

**Certificate of Status Desired:** No

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

KELLY, CHARLES MJR.  
C/O KELLY PASSIDOMO & KELLY, LLP  
2390 TAMiami TRAIL N., STE. 204  
NAPLES, FL 34103 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 # L04000078318  
Name SUNNILAND PARTNERS, LLC  
Address P.O. BOX 930  
City-State-Zip: IMMOKALEE FL 34143

*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:** ALIESE PRIDDY

**MANAGING MEMBER**

**02/23/2024**

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

\_\_\_\_\_  
Date