

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000001974

**Entity Name:** PONCE PORTFOLIO MORTGAGE, LTD.

**Current Principal Place of Business:**

2665 SOUTH BAYSHORE DRIVE  
SUITE 615  
COCONUT GROVE, FL 33133-5406

**Current Mailing Address:**

2665 SOUTH BAYSHORE DRIVE  
SUITE 615  
COCONUT GROVE, FL 33133-5406 US

**FEI Number:** 20-2013027

**Certificate of Status Desired:** No

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

RICE, DOUGLAS N  
2665 SOUTH BAYSHORE DRIVE  
SUITE 615  
COCONUT GROVE, FL 33133-5406 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 # P04000166109  
Name PONCE PORTFOLIO MANAGEMENT,  
INC.  
Address 2665 SOUTH BAYSHORE DRIVE  
SUITE 615  
City-State-Zip: COCONUT GROVE FL 33133-5406

*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:** DOUGLAS N RICE

**MANAGING MEMBER**

**01/07/2015**

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

\_\_\_\_\_  
Date