## 2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05000002322

Entity Name: AN AMERICAN FAMILY LIMITED PARTNERSHIP, LLLP

FILED Sep 12, 2015 Secretary of State CC1103436741

## **Current Principal Place of Business:**

2901 S. ATLANTIC AV UNIT 901

DAYTONA BEACH, FL 32118

## **Current Mailing Address:**

PO BOX 291269

PT. ORANGE, FL 32129 US

FEI Number: 20-4033118 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

REID, NORMAN LJR 2901 S. ATLANTIC AV. UNIT 901 DAYTONA BEACH, FL 32118 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

**General Partner Detail:** 

Document # Document #

Name REID, NORMAN LTRUSTEE Name REID, JOHN K

Address 2901 S. ATLANNTIC AV. Address 3051 ESPERANZA AVENUE

UNIT 901 City-State-Zip: DAYTONA BEACH FL 32118

City-State-Zip: DAYTONA BEACH FL 32118

Document #

Name REID, MATTHEW K

Address 3055 ESPERANZA AVENUE
City-State-Zip: DAYTONA BEACH FL 32118

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: NORMAN L. REID JR.

**GENERAL PARTNER** 

09/12/2015

Date