

2025 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000000442

Entity Name: S.B.N. FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Current Principal Place of Business:

91 HILLCREST DRIVE
WEAVERVILLE, NC 28787

Current Mailing Address:

91 HILLCREST DRIVE
WEAVERVILLE, NC 28787

FEI Number: 20-8636877

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONATHAN H. GREEN & ASSOCIATES, P.A
901 PONCE DE LEON BOULEVARD
SUITE 601
CORAL GABLES, FL 33134 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 NOVAK, STEPHEN BM.D.

Address 91 HILLCREST DRIVE

City-State-Zip: WEAVERVILLE NC 28787

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: STEPHEN B. NOVAK

GP

05/01/2025

Electronic Signature of Signing General Partner Detail

Date