

**2020 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A08000000182

**Entity Name:** LIEBERT FAMILY GROUP LIMITED PARTNERSHIP

**Current Principal Place of Business:**

C/O KELLY PASSIDOMO & ALBA, LLP  
2930 TAMIAMI TRAIL NORTH, SUITE 204  
NAPLES, FL 34103

**Current Mailing Address:**

C/O KELLY PASSIDOMO & ALBA, LLP  
2930 TAMIAMI TRAIL NORTH, SUITE 204  
NAPLES, FL 34103

**FEI Number:** 26-2112142

**Certificate of Status Desired:** No

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

KELLY, CHARLES MJR.  
2930 TAMIAMI TRAIL NORTH, SUITE 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 # P08000018780  
Name OAKLEAF SOUTH CORPORATION  
Address 2390 TAMIAMI TRAIL NORTH, SUITE  
204  
City-State-Zip: NAPLES FL 34103

*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:** CHARLES M. KELLY JR

**MANAGER**

**02/25/2020**

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

\_\_\_\_\_  
Date