

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A11000000009

**Entity Name:** LAFRENIERE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1180 SPRING CENTRE SOUTH BLD  
STE 102  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

1180 SPRING CENTRE SOUTH BLD  
STE 102  
ALTAMONTE SPRINGS, FL 32714 UN

**FEI Number:** 27-4149834

**Certificate of Status Desired:** No

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

LAFRENIERE, STEPHEN J  
1180 SPRING CENTER SOUTH BLVD.  
SUITE 102  
ALTAMONTE SPRINGS, FL 32714 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 #

Document #

Name LAFRENIERE, STEPHEN J

Name LAFRENIERE, DEBORAH A

Address 1180 SPRING CENTRE SOUTH BLD

Address 1180 SPRING CENTRE SOUTH BLD

City-State-Zip: ALTAMONTE SPRINGS FL 32714

City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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 LAFRENIERE

**MANAGER**

**01/12/2015**

Electronic Signature of Signing General Partner Detail

Date