

2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A11000000792

Entity Name: JAMES AND MABEL FAMILY PARTNERSHIP, LLLP

Current Principal Place of Business:

16750 STATE ROAD 52
LAND-O-LAKES, FL 34638

Current Mailing Address:

POST OFFICE BOX 158
LAND-O-LAKES, FL 34639

FEI Number: 45-3994631

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEXLEY, JENNIFER C.W.
16750 STATE ROAD 52
LAND-O-LAKES, FL 34638 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 BEXLEY, JENNIFER C.W. TRUSTEE

Address POST OFFICE BOX 789

City-State-Zip: LAND O LAKES FL 34639

Document #

Name BEXLEY, SUSANNAH ETRUSTEE

Address 5301 NE 15TH AVE.

City-State-Zip: FORT LAUDERDALE FL 33334

Document #

Name HEALIS, TYLER FTRUSTEE

Address P.O. BOX 24945

City-State-Zip: FORT LAUDERDALE FL 33307

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: JENNIFER C.W. BEXLEY

REGISTERED AGENT

03/05/2016

Electronic Signature of Signing General Partner Detail

Date