

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A13000000736

**FILED  
Mar 22, 2015  
Secretary of State  
CC0285422266**

**Entity Name:** LISTA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

12961 DEVA STREET  
CORAL GABLES, FL 33156

**Current Mailing Address:**

12961 DEVA STREET  
CORAL GABLES, FL 33156 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

TOLLEY, RACHEL L  
2525 PONCE DE LEON BLVD  
SUITE 300  
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 LISTA, WALTER L TRUSTEE  
Address 12961 DEVA STREET  
City-State-Zip: CORAL GABLES FL 33156

Document #  
Name LISTA, MARTA V TRUSTEE  
Address 12961 DEVA STREET  
City-State-Zip: CORAL GABLES FL 33156

*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:** LISTA, WALTER L

**TRUSTEE**

**03/22/2015**

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

\_\_\_\_\_  
Date