

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A30079

**Entity Name:** CATEXOR LIMITED PARTNERSHIP I

**Current Principal Place of Business:**

2730 SW 3RD AVENUE  
SUITE 800  
MIAMI, FL 33129

**Current Mailing Address:**

2730 SW 3RD AVENUE  
SUITE 800  
MIAMI, FL 33129

**FEI Number:** 65-0190864

**Certificate of Status Desired:** No

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

WENNERSTROM, STIG  
2730 SW 3RD AVENUE  
800  
MIAMI, FL 33129 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 # L49448  
Name CATEXOR, INC.  
Address 2730 SW 3RD AVENUE, SUITE 800  
City-State-Zip: MIAMI FL 33129

*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:** STIG WENNERSTROM

MGR

04/28/2015

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

\_\_\_\_\_  
Date