

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000000957

**Entity Name:** SZUMLANSKI FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

407 SE 17TH PLACE  
CAPE CORAL, FL 33990

**Current Mailing Address:**

407 SE 17TH PLACE  
CAPE CORAL, FL 33990 US

**FEI Number:** 65-0449617

**Certificate of Status Desired:** No

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

SZUMLANSKI, BARRY  
407 SE 17TH PLACE  
CAPE CORAL, FL 33990 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	SZUMLANSKI, BARRY E	Name	SZUMLANSKI, JULIE
Address	407 SE 17TH PLACE	Address	407 SE 17TH PLACE
City-State-Zip:	CAPE CORAL FL 33990	City-State-Zip:	CAPE CORAL FL 33990

*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:** BARRY SZUMLANSKI

**GP**

**04/30/2015**

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

\_\_\_\_\_  
Date