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: CAROL M PEPIN

Electronic Signature of Signing General Partner Detail

**GENERAL PARTNER** 

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:

# **General Partner Detail :**

Document #		Document #	
Name	PEPIN, GEORGE E	Name	PEPIN, CAROL M
Address	7673 HOOPER ROAD SUITE #10	Address	7673 HOOPER ROAD SUITE #10
City-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	WEST PALM BEACH FL 33411

# 2018 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

#### DOCUMENT# A9600000333

Entity Name: PEPIN FAMILY LIMITED PARTNERSHIP

## **Current Principal Place of Business:**

7673 HOOPER ROAD SUITE #10 WEST PALM BEACH, FL 33411

## **Current Mailing Address:**

P.O. BOX 15636 WEST PALM BEACH, FL 33416 US

#### FEI Number: 65-0642586

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

PEPIN, CAROL M 7673 HOOPER ROAD SUITE #10 WEST PALM BEACH, FL 33411 US

Electronic Signature of Registered Agent



Date

#### FILED Jan 12, 2018 Secretary of State CC0440528431

Certificate of Status Desired: No

Date

01/12/2018