## 2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000437

**Entity Name: CUMMINGS POINT LIMITED PARTNERSHIP** 

**Current Principal Place of Business:** 

C/O DONAHUE 35 EASTON RD WESTPORT, CT 06880

**Current Mailing Address:** 

C/O DONAHUE 35 EASTON RD WESTPORT, CT 06880

FEI Number: 65-0842024 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

AMERILAWYER 343 ALMERIA AVENUE 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

FILED Mar 05, 2016

**Secretary of State** 

CC3892126537

**General Partner Detail:** 

Document # Document #

Name DONAHUE, THOMAS R Name DONAHUE, NICHOLAS P

Address 1050 PARK AVENUE, APT. 5C Address 35 EASTON RD

City-State-Zip: NEW YORK NY 10128 City-State-Zip: WESTPORT CT 06880

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.