

2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000980

Entity Name: EBERWEIN PARKS PARTNERSHIP, LLLP**Current Principal Place of Business:**123 WEST KING STREET
ORLANDO, FL 32804**Current Mailing Address:**123 WEST KING STREET
ORLANDO, FL 32804**FEI Number:** 59-3500833**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EBERWEIN, WALLACE P
123 WEST KING STREET
ORLANDO, FL 32804 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 EBERWEIN, VIRGINIA DTRUSTEE
Address 2960 N TROPICAL TR
City-State-Zip: MERRITT ISLAND FL 32953-8212

Document #
Name FOLCARELLI, ELIZABETH E
Address 2019 N. INDIAN RIVER DR.
City-State-Zip: COCOA FL 32922

Document #
Name EBERWEIN, WALLACE P
Address 123 WEST KING STREET
City-State-Zip: ORLANDO FL 32804

Document #
Name WISE, ROSEMARY E
Address P.O. BOX 298476
City-State-Zip: WASILLA AK 99629

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: WALLACE EBERWEIN**OWNER/AGENT****01/08/2014**_____
Electronic Signature of Signing General Partner Detail_____
Date