

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000000980

**Entity Name:** EBERWEIN PARKS PARTNERSHIP, LLLP

**Current Principal Place of Business:**

122 RATTAN AVENUE  
CAPE CANAVERAL, FL 32920

**Current Mailing Address:**

P.O. BOX 635  
CAPE CANAVERAL, FL 32920 US

**FEI Number:** 59-3500833

**Certificate of Status Desired:** No

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

EBERWEIN, WALLACE P  
122 RATTAN AVENUE  
CAPE CANAVERAL, FL 32920 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 P.O. BOX 635

City-State-Zip: CAPE CANAVERAL FL 32920

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

**GENERAL PARTNER,  
MANAGER**

**04/10/2015**

Electronic Signature of Signing General Partner Detail

Date