

2019 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A99000001479

Entity Name: WODECKI FLORIDA LIMITED PARTNERSHIP

Current Principal Place of Business:

215 ST. ANDREWS ROAD
STATESVILLE, NC 28625

Current Mailing Address:

PO BOX 5489
STATESVILLE, NC 28687

FEI Number: 56-2157225

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: JOHN BRENNAN

02/14/2019

Electronic Signature of Registered Agent

Date

General Partner Detail :

Document # P99000079544
Name WODECKI, INC.
Address 215 ST. ANDREWS ROAD
City-State-Zip: STATESVILLE NC 28625

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: DEBRA WODECKI

SHAREHOLDER

02/14/2019

Electronic Signature of Signing General Partner Detail

Date