

**2019 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B1400000259

**Entity Name:** FIRST CENTRAL TOWER, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2 POST ROAD WEST  
WESTPORT, CT 06880

**Current Mailing Address:**

2 POST ROAD WEST  
WESTPORT, CT 06880 US

**FEI Number:** 47-2272375

**Certificate of Status Desired:** No

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

C T 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**General Partner Detail :**

Document #

Name FIRST CENTRAL TOWER GP CORP

Address 2 POST ROAD WEST

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.*

**SIGNATURE:** FIRST CENTRAL TOWER GP CORP

GP

03/18/2019

\_\_\_\_\_ Electronic Signature of Signing General Partner Detail

\_\_\_\_\_ Date