

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Feb 29, 2008 08:00 A
Secretary of State

DOCUMENT # A99000000676

1. Entity Name
LECCESE FAMILY PARTNERSHIP, LTD.



Principal Place of Business
650 S. NORTHLAKE BLVD, STE 450
ALTAMONTE SPRINGS, FL 32701

Mailing Address
650 S. NORTHLAKE BLVD, STE 450
ALTAMONTE SPRINGS, FL 32701



01232008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3525076

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

LECCESE, SALVADOR F
650 S. NORTHLAKE BLVD, STE 450
ALTAMONTE SPRINGS, FL 32701

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Salvador F. Leccese

Signature, typed or printed name of registered agent and title if applicable

2/20/08

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P98000051093**
NAME **LECCESE HOLDINGS, INC.**
STREET ADDRESS **650 S. NORTHLAKE BLVD, STE 450**
CITY-ST-ZIP **ALTAMONTE SPRINGS, FL 32701**

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U00000843932
03/12/08-80013-025 508.75

DO NOT WRITE
IN THIS SPACE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE:

Salvador F. Leccese

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/20/08

Date

407
645-5575

Daytime Phone #

STAPLE CHECK HERE