

2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000507

Entity Name: ORNS ENTERPRISE ASSOCIATES, LTD.**Current Principal Place of Business:**640 BEACH DRIVE NE
ST. PETERSBURG, FL 33701**Current Mailing Address:**640 BEACH DRIVE NE
ST. PETERSBURG, FL 33701 US**FEI Number:** 04-3638379**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KITENPLON, DAVID A
640 BEACH DRIVE NE
ST. PETERSBURG, FL 33701 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 ORNS, JILL R

Address 1 BEACH DRIVE
#1206

City-State-Zip: ST. PETERSBURG FL 33701

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Name MORRIS, PAMELA B

Address P.O. BOX 180494

City-State-Zip: BOSTON MA 02118

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Name KITENPLON, IVY L

Address 640 BEACH DRIVE NE

City-State-Zip: ST. PETERSBURG FL 33701

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: IVY KITENPLON

GP

01/24/2023

Electronic Signature of Signing General Partner Detail_____
Date