

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000530

**Entity Name:** PONTE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

511 S. E. 5TH AVENUE  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

1379 TUCKER RD.  
DARTMOUTH, MA 02747

**FEI Number:** 41-2099777

**Certificate of Status Desired:** No

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

LAMONT NEIMAN INTERIAN & BELLET, PA  
NEW WORLD TOWER SUITE 801  
100 N. BISCAYNE BLVD.  
MIAMI, FL 33132 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 PONTE MANAGEMENT, INC.

Address 511 S. E. 5TH AVENUE

City-State-Zip: FORT LAUDERDALE FL 33301

*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:** PAUL PONTE

**PRESIDENT**

**01/16/2015**

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

\_\_\_\_\_  
Date