

**2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000001632

**Entity Name:** FRANCES L. RINES AND JAMES H. RINES FAMILY LIMITED PARTNERSHIP

**FILED**  
**Feb 16, 2024**  
**Secretary of State**  
**0951168397CC**

**Current Principal Place of Business:**

15375 SW WARFIELD BLVD.  
INDIANTOWN, FL 34956

**Current Mailing Address:**

PO BOX 307  
INDIANTOWN, FL 34956 US

**FEI Number: 33-1074473**

**Certificate of Status Desired: No**

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

HARDEE, DEBORAH L  
15375 SW WARFIELD BLVD.  
INDIANTOWN, FL 34956 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: DEBORAH L. HARDEE

02/16/2024

Electronic Signature of Registered Agent

Date

**General Partner Detail :**

Document #

Name HARDEE, DEBORAH L

Address 15375 SW WARFIELD BLVD.

City-State-Zip: INDIANTOWN FL 34956

*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: DEBORAH L HARDEE

GP

02/16/2024

Electronic Signature of Signing General Partner Detail

Date