## 2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A04799

Entity Name: BOCA MED ASSOCIATES, LLLP

**Current Principal Place of Business:** 

3901 S.E. LUCIE BLVD. #61 STUART, FL 34997

**Current Mailing Address:** 

3901 S.E. LUCIE BLVD. #61 STUART. FL 34997

FEI Number: 59-1742710 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VENEZIA, RICHARD JDR. 3901 ST. LUCIE BLVD #61 STUART, FL 34997 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

FILED Apr 09, 2015

**Secretary of State** 

CC4854224470

## **General Partner Detail:**

Document #

Name VENEZIA, RICHARD J
Address 3901 ST. LUCIE BLVD #61

City-State-Zip: STUART FL 34997

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: RICHARD J. VENEZIA

GENERAL PARTNER

04/09/2015