

**2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000002319

**Entity Name:** AHAD ISLAM FAMILY LIMITED PARTNERSHIP, LLLP

**Current Principal Place of Business:**

3390 TAMIAMI TRAIL, #205  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

3390 TAMIAMI TRAIL, #205  
PORT CHARLOTTE, FL 33952

**FEI Number:** 26-1208685

**Certificate of Status Desired:** No

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

LANE, DANIEL A  
4166 TAMIAMI TRAIL  
UNIT B  
PORT CHARLOTTE, FL 33952 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 AHAD, ARSHAD

Address 3390 TAMIAMI TRAIL, #205

City-State-Zip: PORT CHARLOTTE FL 33952

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:** ARSHAD AHAD

**GENERAL PARTNER**

**04/29/2014**

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

\_\_\_\_\_  
Date