

2019 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000000800

Entity Name: CARPLES FAMILY LLLP

Current Principal Place of Business:

% MS. FLORENCE L. CARPLES
401 E. LINTON BLVD., APT.553
DELRAY BEACH, FL 33483

Current Mailing Address:

% MR. DAVID N. CARPLES
7804 FOX GATE COURT
BETHESDA, MD 20817 US

FEI Number: 26-0411711

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARPLES, FLORENCE L
401 E. LINTON BLVD., APT.553
DELRAY BEACH, FL 33483 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 CARPLES FAMILY CORP.

Address 401 E. LINTON BLVD., APT. 553

City-State-Zip: DELRAY BEACH FL 33483

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: STEVEN A. CARPLES

PARTNER

01/22/2019

Electronic Signature of Signing General Partner Detail

Date