

**2019 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A13000000631

**Entity Name:** LECCESE FAMILY PARTNERSHIP IV, LLLP

**Current Principal Place of Business:**

650 S. NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

650 S. NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 46-3877484

**Certificate of Status Desired:** No

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

LECCESE, SALVADOR F  
650 S. NORTHLAKE BOULEVARD  
SUITE 450  
ALTAMONTE SPRINGS, FL 32701 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 # L09000063255  
Name LECCESE HOLDINGS, LLC  
Address 650 S. NORTHLAKE BOULEVARD,  
SUITE 450  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** LECCESE HOLDINGS LLC

GP

03/22/2019

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

\_\_\_\_\_  
Date