2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A16000000246

Entity Name: TEGAN FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

5438 COLD SPRING LN NORTH PORT, FL. FL 34291

Current Mailing Address:

5438 COLDSPRING LANE NORTH PORT. FL 34291 US

FEI Number: 81-2265960 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEMEK, KATHLEEN J 5438 COLD SPRING LN NORTH PORT, FL 34291 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: KATHLEEN LEMEK 04/03/2024

Electronic Signature of Registered Agent

Date

FILED Apr 03, 2024

Secretary of State

9530629368CC

General Partner Detail:

Document # Document #

NameLEMEK, THEODORE JNameLEMEK, KATHLEEN AAddress5438 COLD SPRING LNAddress5438 COLD SPRING LNCity-State-Zip:NORTH PORT FL 34291City-State-Zip:NORTH PORT FL 34291

Document #

Name CRONIN, EDWARD W

Address 5438 COLD SPRING LN

City-State-Zip: NORTH PORT, FL FL 34291

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: KATHLEEN LEMEK

GENERAL PARTNER

04/03/2024