## 2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A1700000232

Entity Name: LEE S. LASSER FAMILY LIMITED PARTNERSHIP, NO. 4

FILED
Jan 04, 2024
Secretary of State
5402919315CC

## **Current Principal Place of Business:**

11943 NW 37TH STREET CORAL SPRINGS. FL 33065

## **Current Mailing Address:**

11943 NW 37TH STREET CORAL SPRINGS. FL 33065 US

FEI Number: 82-1498941 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LASSER, DAVID A 11943 NW 37TH STREET CORAL SPRINGS, FL 33065 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 # Document #

NameLASSER, DAVID A TRUSTEENameLOUIS, ROBIN E TRUSTEEAddress11943 NW 37TH STREETAddress11943 NW 37TH STREETCity-State-Zip:CORAL SPRINGS FL 33065City-State-Zip:CORAL SPRINGS FL 33065

Document #

Name LASSER, LEE S TRUSTEE
Address 11943 NW 37TH STREET
City-State-Zip: CORAL SPRINGS FL 33065

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: DAVID LASSER

Electronic Signature of Signing General Partner Detail

PARTNER

01/04/2024