

2022 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A17000000232

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

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

Document

Name LOUIS, ROBIN E TRUSTEE
Address 11943 NW 37TH STREET
City-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**PARTNER****01/03/2022**_____
Electronic Signature of Signing General Partner Detail_____
Date