

**2020 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A19000000176

**Entity Name:** CARON LIMITED PARTNERSHIP

**Current Principal Place of Business:**

5852 MEDINAH WAY  
ORLANDO, FL 32819

**Current Mailing Address:**

5852 MEDINAH WAY  
ORLANDO, FL 32819

**FEI Number:** 59-3168450

**Certificate of Status Desired:** No

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

CARON, RAYMOND F  
453 NORTH KIRKMAN RD  
SUITE 101  
ORLANDO, FL 32811 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 CARON, INMA A  
Address 5852 MEDINAH WAY  
City-State-Zip: ORLANDO FL 32819

Document #  
Name CARON, KRISTEN N  
Address 5852 MEDINAH WAY  
City-State-Zip: ORLANDO FL 32811

Document #  
Name CARON, MARY M  
Address 5852 MEDINAH WAY  
City-State-Zip: ORLANDO FL 32819

Document #  
Name CARON, NATALIE F  
Address 5852 MEDINAH WAY  
City-State-Zip: ORLANDO FL 32819

*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:** INMA A CARON

**GENERAL PARTNER**

**06/07/2020**

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

\_\_\_\_\_  
Date