#### **2020 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A19000000211

Entity Name: GIGLIO FAMILY LIMITED PARTNERSHIP, LLLP

May 14, 2020

# **Secretary of State** 8690046487CC

**FILED** 

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

718 SHAKETT CREEK DR. NOKOMIS. FL 34275

## **Current Mailing Address:**

718 SHAKETT CREEK DR. NOKOMIS. FL 34275 US

FEI Number: 84-1863751 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HOLMES, DAVID 99 NESBIT ST. PUNTA GORDA, FL 33950 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:**

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Document #

Name GIGLIO, JOHN R Name GIGLIO, LISA A

718 SHAKETT CREEK DR. Address

Address 718 SHAKETT CREEK DR.

City-State-Zip: NOKOMIS FL 34275

City-State-Zip: NOKOMIS FL 34275

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: JOHN GIGLIO

**GENERAL PARTNER** 

05/14/2020