

**2022 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A29661

**Entity Name:** BOX RANCH OF MARTIN COUNTY, LTD.

**Current Principal Place of Business:**

C/O CLIFFORD F. BURG  
7929 SW JACK JAMES DRIVE  
STUART, FL 34997

**Current Mailing Address:**

C/O CLIFFORD F. BURG  
7929 SW JACK JAMES DRIVE  
STUART, FL 34997

**FEI Number:** 59-3013835

**Certificate of Status Desired:** No

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

BURG, CLIFFORD F  
7929 SW JACK JAMES DRIVE  
STUART, FL 34997 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 BOX RANCH OF MARTIN COUNTY LLC

Address 7929 SW JACK JAMES DRIVE

City-State-Zip: STUART FL 34997

*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:** CLIFFORD F BURG

MGR/GP

03/23/2022

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

\_\_\_\_\_  
Date