

**2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A30503

**Entity Name:** CHILDREN'S CASTLE OF KISSIMMEE, LLLP

**Current Principal Place of Business:**

C/O FISHBACK ENTERPRISES, INC.  
1431 N. CENTRAL AVE.  
KISSIMMEE, FL 34741

**Current Mailing Address:**

C/O FISHBACK ENTERPRISES, INC.  
1431 N. CENTRAL AVE.  
KISSIMMEE, FL 34741

**FEI Number:** 59-3025637

**Certificate of Status Desired:** No

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

FISHBACK ENTERPRISES, INC.  
1431 N. CENTRAL AVENUE  
KISSIMMEE, FL 34741 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 APY, BONNIE

Address 1431 N. CENTRAL AVENUE

City-State-Zip: KISSIMMEE FL 34741

Document #

Name HAMANN, SUSAN

Address 1431 N. CENTRAL AVENUE

City-State-Zip: KISSIMMEE FL 34741

Document #

Name MARQUIS, CAROL

Address 1431 N. CENTRAL AVENUE

City-State-Zip: KISSIMMEE FL 34741

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:** CAROL MARQUIS

**PRESIDENT**

**01/25/2023**

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

\_\_\_\_\_  
Date