### 2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A9900000658

Entity Name: GAINESVILLE COMMERCE CENTER LIMITED PARTNERSHIP

**FILED** Apr 22, 2014 **Secretary of State** CC7699153281

# **Current Principal Place of Business:**

C/O AMJ INC. OF GAINESVILLE 502 NW 16TH AVENUE GAINESVILLE, FL 32601

# **Current Mailing Address:**

C/O AMJ INC. OF GAINESVILLE 502 NW 16TH AVENUE GAINESVILLE, FL 32601 US

FEI Number: 59-3574207 Certificate of Status Desired: No

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

WARREN, MICHAEL E C/O AMJ INC. OF GAINESVILLE 502 NW 16TH AVENUE GAINESVILLE, FL 32601 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 # 526352

AMJ INC. OF GAINESVILLE Name 502 N.W. 16TH AVENUE Address City-State-Zip: GAINESVILLE FL 32601

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.

RA

Electronic Signature of Signing General Partner Detail