

**2017 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A26360

**Entity Name:** UNITED TRUST FUND LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2 ALHAMBRA PLAZA  
SUITE 1240  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2 ALHAMBRA PLAZA  
SUITE 1240  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-0046462

**Certificate of Status Desired:** No

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

UTF, INC. (UNITED TRUST FUND, INC.)  
2 ALHAMBRA PLAZA  
SUITE 1240  
CORAL GABLES, FL 33134 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 # 527202  
Name UNITED TRUST FUND, INC.  
Address 2 ALHAMBRA PLAZA  
SUITE 1240  
City-State-Zip: CORAL GABLES FL 33134

*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:** JAMES NOLAN

EVP

02/24/2017

Electronic Signature of Signing General Partner Detail

Date