2019 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B0000000248

Entity Name: GRAHAM FLORIDA MEDICAL BUILDING LIMITED

PARTNERSHIP

Current Principal Place of Business:

505 5TH AVENUE SUITE 200 DES MOINES, IA 50309

Current Mailing Address:

505 5TH AVENUE SUITE 200 DES MOINES, IA 50309

FEI Number: 42-1507780 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Jan 24, 2019

Secretary of State

8216677370CC

General Partner Detail:

Document #

Name THE GRAHAM GROUP, INC.
Address 505 5TH AVENUE, SUITE 200

City-State-Zip: DES MOINES IA 50309

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: CHARLES R. TAYLOR

SECRETARY

01/24/2019