

**2024 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B98000000568

**Entity Name:** WILLIAM A. BROWN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

106 WEST STANLEY STREET  
TAMPA, FL 33604

**Current Mailing Address:**

P.O. BOX 9127  
TAMPA, FL 33674 US

**FEI Number:** 59-3477236

**Certificate of Status Desired:** No

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

BROWN, WILLIAM A  
106 WEST STANLEY STREET  
TAMPA, FL 33604 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 BROWN, WILLIAM A

Address 106 WEST STANLEY STREET

City-State-Zip: TAMPA FL 33604

*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:** WILLIAM A BROWN

GP

04/09/2024

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

\_\_\_\_\_  
Date