

2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A16000000533

Entity Name: AMBAR VILLAS, LTD.

Current Principal Place of Business:

1649 ATLANTIC BLVD
JACKSONVILLE, FL 32207

Current Mailing Address:

1649 ATLANTIC BLVD
JACKSONVILLE, FL 32207 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TVC AMBAR, INC.
1649 ATLANTIC BLVD
JACKSONVILLE, FL 32207 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 # L16000183032
Name AMBAR VILLAS GP, LLC
Address 1649 ATLANTIC BLVD
City-State-Zip: JACKSONVILLE FL 32207

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: JOHN D ROOD

01/12/2024

_____ Electronic Signature of Signing General Partner Detail

_____ Date