# 2019 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

#### DOCUMENT# B1600000240

Entity Name: FAW, CASSON & CO. LLP

# **Current Principal Place of Business:**

9748 STEPHEN DECATUR HWY, SUITE 103 OCEAN CITY, MD 21842

# **Current Mailing Address:**

9748 STEPHEN DECATUR HWY, SUITE 103 OCEAN CITY, MD 21842 US

# FEI Number: 52-0619968

## Name and Address of Current Registered Agent:

HARPER, LAUREN S CPA 698 NE SPANISH RIVER BLVD APT26 BOCA RATON, FL 33431 US FILED Feb 07, 2019 Secretary of State 1382086285CC

Certificate of Status Desired: No

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

# General Partner Detail :

Document #		Document #	
Name	HARPER, LAUREN S	Name	HASTINGS, LISA S
Address	9748 STEPHEN DECATUR HWY	Address	160 GREENTREE DRIVE, 203
City-State-Zip:	OCEAN CITY MD 21842	City-State-Zip:	DOVER DE 19904
Document #		Document #	
Name	FONDA, KIMBERLY A	Name	HOUCK, ALISON L
Address	160 GREENTREE DRIVE, 203	Address	20245 BAY VISTA ROAD
City-State-Zip:	DOVER DE 19904	City-State-Zip:	REHOBOTH BEACH DE 19971
Document #		Document #	
Name	ORDWAY, TAMMY J	Name	STETINA, BRIAN J
Address	160 GREENTREE DRIVE 203	Address	160 GREENTREE DRIVE 203
City-State-Zip:	DOVER DE 19904	City-State-Zip:	DOVER DE 19904

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: LAUREN S. HARPER

PARTNER

02/07/2019

Date

Electronic Signature of Signing General Partner Detail