

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000183

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** 1002 EAST NEWPORT PARTNERSHIP, LTD.

**Current Principal Place of Business:**

1002 EAST NEWPORT CENTER DRIVE  
SUITE 100  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

5300 WEST HILLSBORO BLVD  
SUITE 100  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

1002 EAST NEWPORT CENTER DRIVE  
SUITE 100  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

5300 WEST HILLSBORO BLVD  
SUITE 100  
COCONUT CREEK, FL 33073

**FEI Number:** 01-0613178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELLMAN, ED  
1002 E. NEWPORT CENTER DRIVE  
SUITE 100  
DEERFIELD BEACH, FL 33442 US

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

ELLMAN, ED  
5300 WEST HILLSBORO BLVD  
SUITE 100  
COCONUT CREEK, FL 33073 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: ED ELLMAN

04/04/2011

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: 1002 EAST NEWPORT CENTER, LLC  
Address: 1002 EAST NEWPORT CENTER DRIVE  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDRESS CHANGES ONLY:**

Address: 5300 WEST HILLSBORO BLVD SUITE 100  
City-St-Zip: COCONUT CREEK, FL 33073

I hereby certify that the information indicated on this 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.

SIGNATURE: ED ELLMAN

04/04/2011

Electronic Signature of Signing General Partner

Date