

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000000437

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** CUMMINGS POINT LIMITED PARTNERSHIP

**Current Principal Place of Business:**

C/O DONAHUE  
35 EASTON RD  
WESTPORT, CT 06880

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DONAHUE  
35 EASTON RD  
WESTPORT, CT 06880

**New Mailing Address:**

**FEI Number:** 65-0842024      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      US

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

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 INFORMATION:**

Document #:  
Name: DONAHUE, THOMAS R  
Address: 1050 PARK AVENUE, APT. 5C  
City-St-Zip: NEW YORK, NY 10128

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:  
Name: DONAHUE, NICHOLAS P  
Address: 35 EASTON RD  
City-St-Zip: WESTPORT, CT 06880

Address:  
City-St-Zip:

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: THOMAS DONAHUE

GP

01/27/2011

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

\_\_\_\_\_  
Date